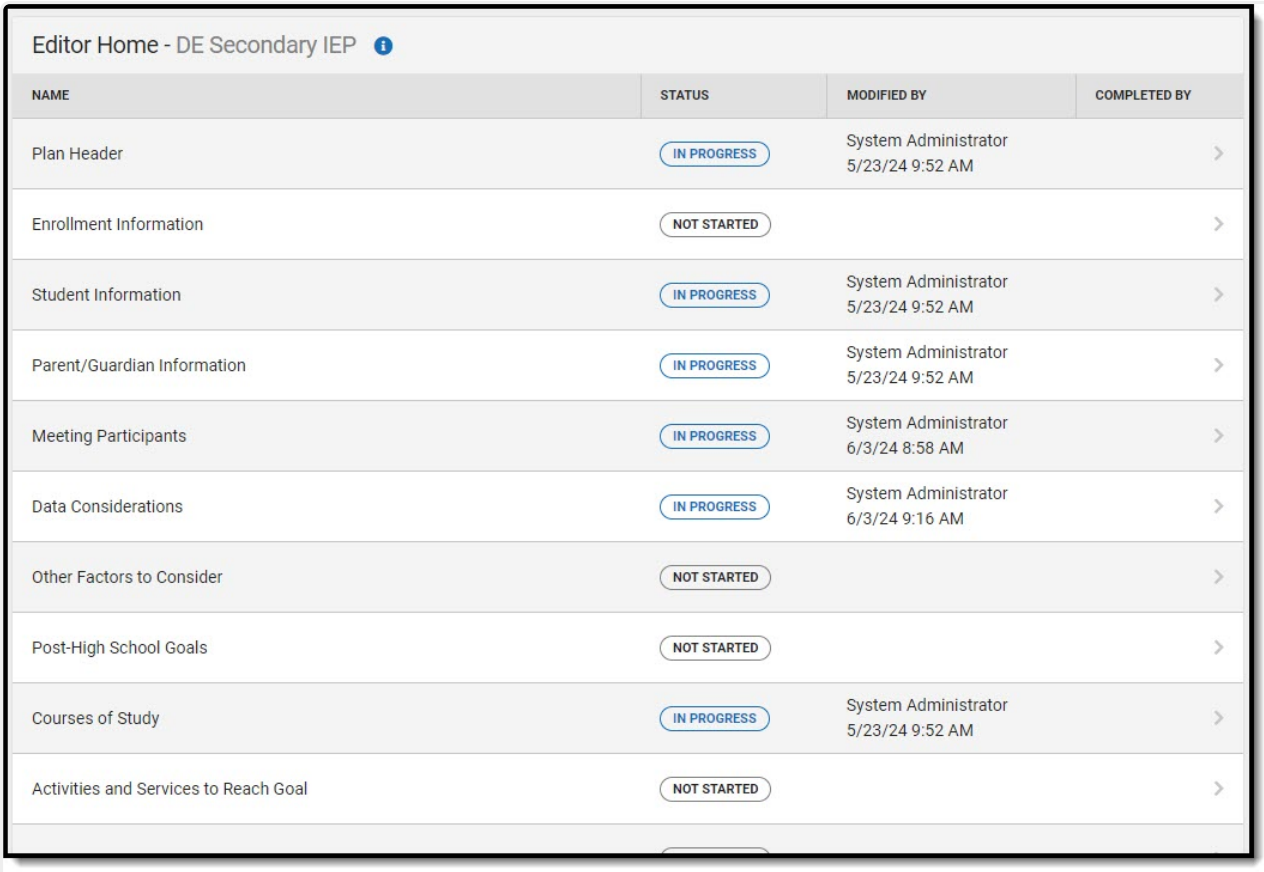
Secondary Individual Education Plan (Delaware)

Last Modified on 08/20/2026 10:10 am CDT

Tool Search: Special Ed Documents

The Secondary Individual Education Plan captures secondary student special education information and matches the required documentation provided by the state of Delaware. This document describes each editor, each field on the editor, and any special considerations and instructions. For information on general functionality, navigation, and additional plan and evaluation features, see the core Plan and Evaluation Information article.

The current print format is **DE Secondary IEP 2026.2**. Delaware is a State Edition. Districts cannot change the plan format.



Editor Home

Images in Text Fields

Delaware users can add images to WYSIWYG text fields in Special Education documents. These images also display on the printed document. See the Enable image upload in text fields for

Special Ed Documents article for setup information.

Not Needed Status Information

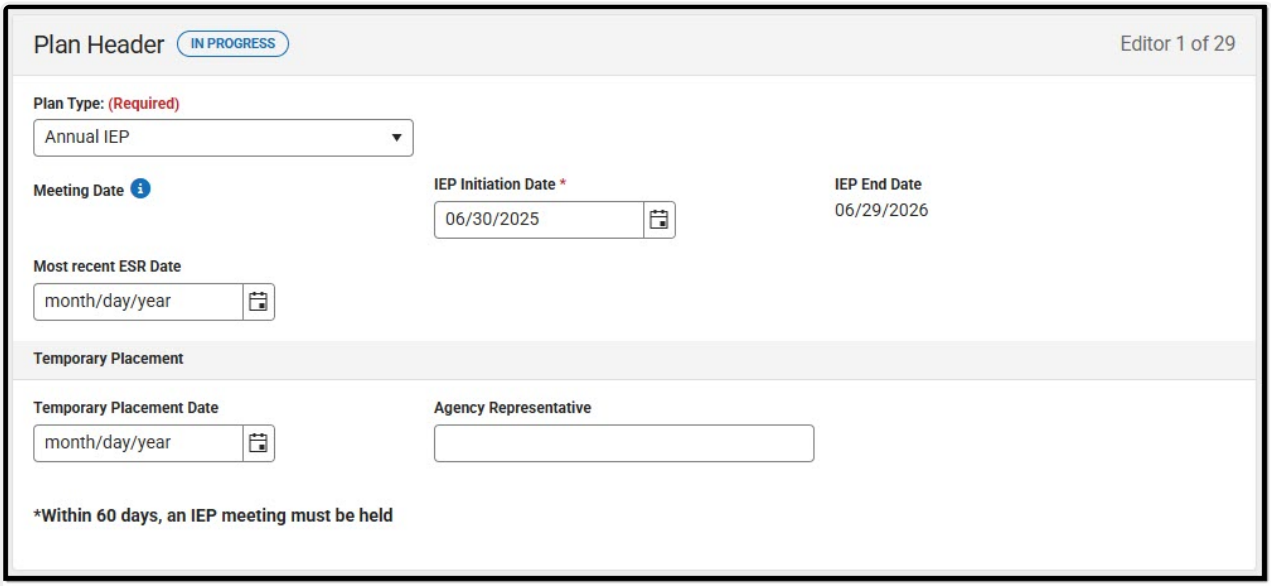
Editors marked as Not Needed DO NOT print. The following editors cannot be placed in a Not Needed Status:

- Meeting Participants
- Data Considerations
- Other Factors to Consider
- Graduation Information
- Course of Study
- Post-High School Goals, Activities and Services to Reach Goal
- Interagency Support
- Unique Needs/Present Levels/Annual Goals and Benchmarks
- Specially Designed Instruction
- Transportation
- Participation in Statewide Assessments
- Discipline
- Participation in Twelve Month Program
- Consideration of Reading-Based ESY
- Reading-Based ESY Services
- ESY
- Least Restrictive Environment/Placement

Plan Header

The Plan Header editor stores plan information as well as related dates.

This editor must be saved before entering data into other editors.



Plan Header Editor

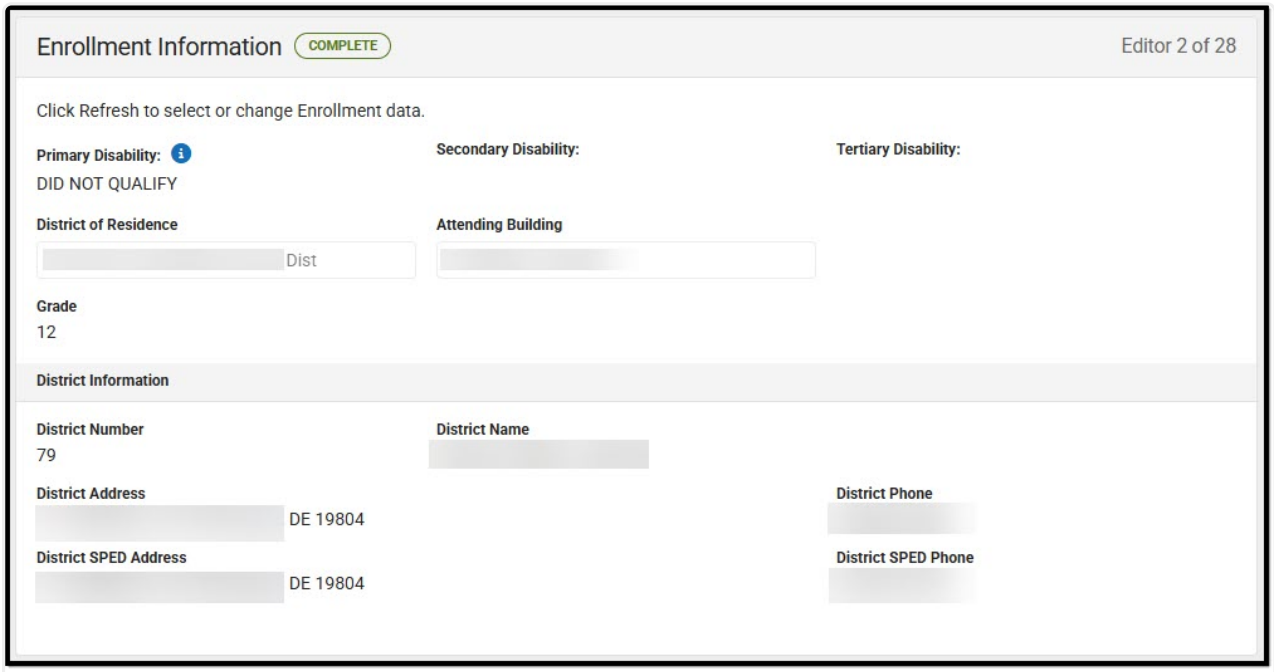
Click here to expand...

Field	Description	Validation
Plan Type *Required*	The type of plan. Options include: • Annual IEP • Annual IEP/Reevaluation Eligibility Determination • IEP Meeting • IEP Revision • IEP Revision/Reevaluation Eligibility Determination • Initial Eligibility Determination • Initial IEP • Initial IEP/Initial Eligibility Determination • PPPS Meeting • Reevaluation Eligibility Determination	N/A
Meeting Date	The day the student's team met.	This field is populated from the Meeting Invitation document selected on the Meeting Participants editorr, but can be edited as needed.
IEP Initiation Date *Required*	The first day of the student's plan.	N/A
IEP End Date	The last day of the student's plan.	This field automatically calculates to 364 days from the Meeting Date.
Most Recent ESR Date	The date of the student's most recent Evaluation.	This field pulls in the date from the most recent, locked Evaluation when it exists, but can be edited.
Temporary Placement		
Temporary Placement Date	The date of the temporary placement.	N/A
Agency Representative	The name of the agency representative in charge of the placement.	This field is limited to 150 characters.

Enrollment Information

The Enrollment Information editor is a read-only editor that pulls in district and school information

where the student is enrolled. This editor also documents the student's disability(ies).



Enrollment Information Editor

Click here to expand...

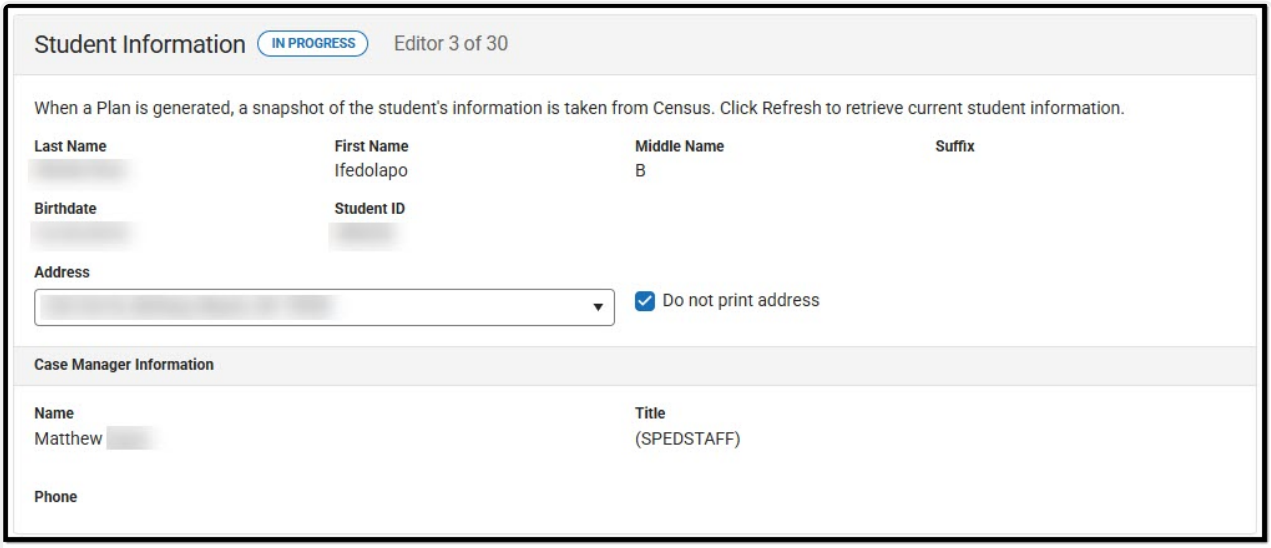
Field	Description	Validation
Primary Disability	The student's first disability. Options include: • 1000 Autism • 1100 Deaf-Blind • 1400 Developmental Delay • 0200 Emotional Disability • 0700 Hearing Impairment • 0300 Learning Disability • 0100 Mild Intellectual Disability • 0400 Moderate Intellectual Disability • 0603 Orthopedic Impairment • 0601 Other Health Impairment • 0900 Partially Sighted • 1600 Pre-School Speech Delay • 0500 Severe Intellectual Disability • 1200 Speech and/or Language Impairment • 1300 Traumatic Brain Injury • 0800 Visually Impaired	This pulls in from the Section D: Eligibility Determination editor from the most recent, locked Evaluation document, when available. However, this field can still be modified.

Field	Description	Validation
Secondary Disability	The student's second disability, when applicable. The options available are the same as the Primary Disability options.	This pulls in from the Section D: Eligibility Determination editor from the most recent, locked Evaluation document, when available. However, this field can still be modified.
Tertiary Disability	The student's third disability, when applicable. The options available are the same as the Primary Disability options.	This pulls in from the Section D: Eligibility Determination editor from the most recent, locked Evaluation document, when available. However, this field can still be modified.
District of Residence	The student's district of residence.	This field pulls in from the student's Enrollment record when available but can be manually edited.
Attending Building	The building where the student attends school.	Upon Refresh, this field is pulled from the Enrollment tool but can be manually edited.
Grade	The student's grade.	Upon Refresh, this field is pulled from the Enrollment tool and cannot be modified. **Database Location:** enrollment.grade
District Information		
District Number	The district number associated with the Enrolled school.	District Information > State District Number
District Name	The district name associated with the Enrolled school.	District Information > Name
District Address	The district address associated with the Enrolled school.	District Information > Address
District Phone	The district phone number associated with the Enrolled school.	District Information > Phone
District SPED Address	The district special education address associated with the Enrolled school.	District Information > SPED Address
District SPED Phone	The district special ed phone number associated with the Enrolled school.	District Information > SPED Phone

Student Information

The Student Information editor pulls demographic information regarding the student. This is a read-only editor.

The **Refresh** button retrieves a fresh copy of data from the student's record.



Student Information Editor

Click here to expand...

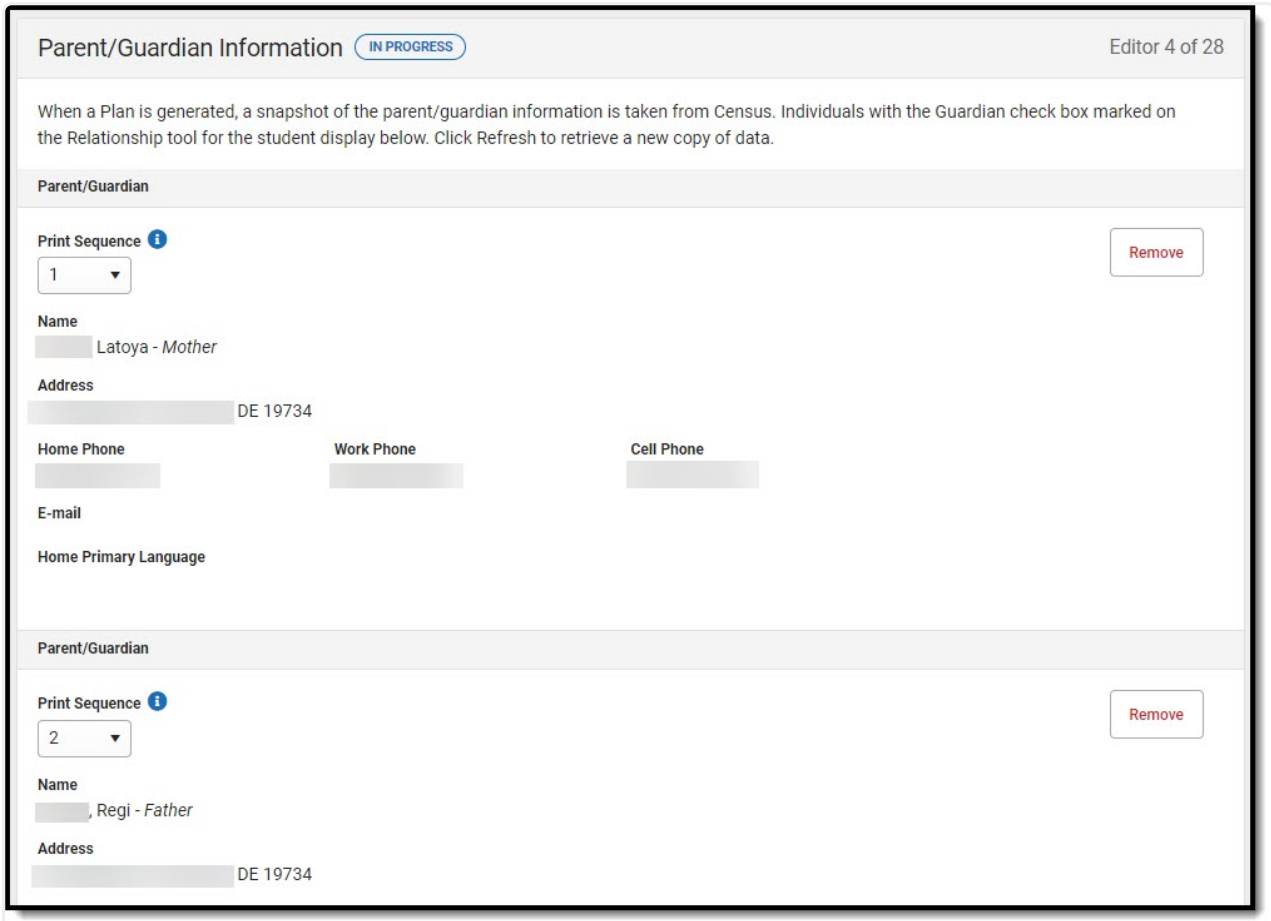
Field Name	Description	Database and UI Location (when Refreshed is clicked)
Last Name	The student's last name.	Demographics > Last Name identity.lastName
First Name	The student's first name.	Demographics > First Name identity.firstName
Middle Name	The student's middle name.	Demographics > Middle Name identity.middleName
Suffix	The student's suffix.	Demographics > Suffix Name identity.suffix

Field Name	Description	Database and UI Location (when Refreshed is clicked)
Birthdate	The student's birthdate.	Demographics > Birth Date identity.birthDate
Student ID	The student's ID number.	Enrollment > Student Number identity.studentNumber
Address	The student's address.	Households > Address Info address.number; address.street; address.tag; address.prefix; address.dir; address.apt; address.city; address.state; address.zip
Do not print address	When marked, the student's address does not print.	N/A
Case Manager Information		
Name	The first and last name of the team member.	Student Information > Special Ed Team Members
Title	The role of the team member.	Student Information > Special Ed Team Members
Phone	The phone number of the team member.	Student Information > Special Ed Team Members

Parent/Guardian Information

The Parent/Guardian Information editor pulls the contact information of the student's parent/guardian(s).

The **Refresh** button retrieves a fresh copy of data from the parent/guardian's record.



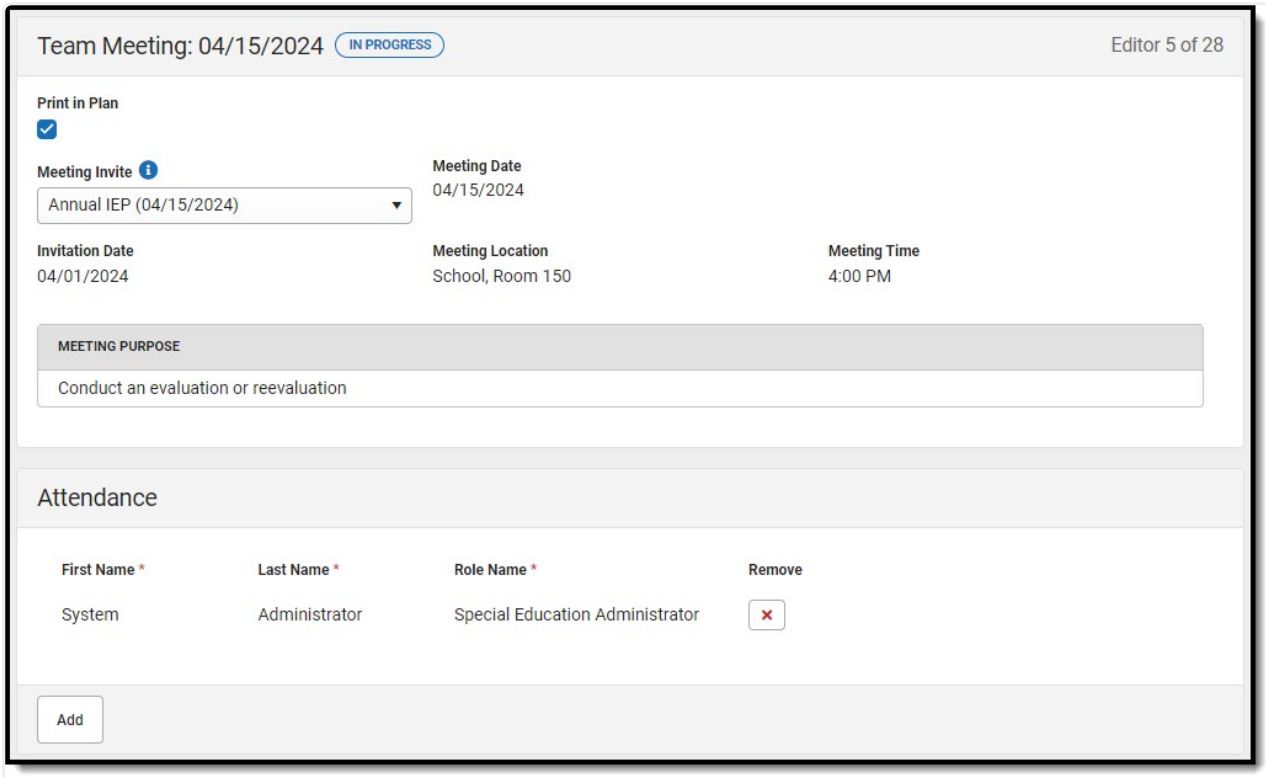
Parent/Guardian Information Editor

Click here to expand...

Field	Description
Print Sequence	The order in which the parent/guardian displays.
Name	The name of the parent/guardian.
Address	The address of the parent/guardian.
Home Phone	The parent/guardian's home phone.
Work Phone	The parent/guardian's work phone.
Cell Phone	The parent/guardian's cell phone.
Email	The parent/guardian's email.
Home Primary Language	The language the parent/guardian speaks at home.

Meeting Participants

The Meeting Participants editor records team meetings and participants for the student.



Meeting Participants Editor

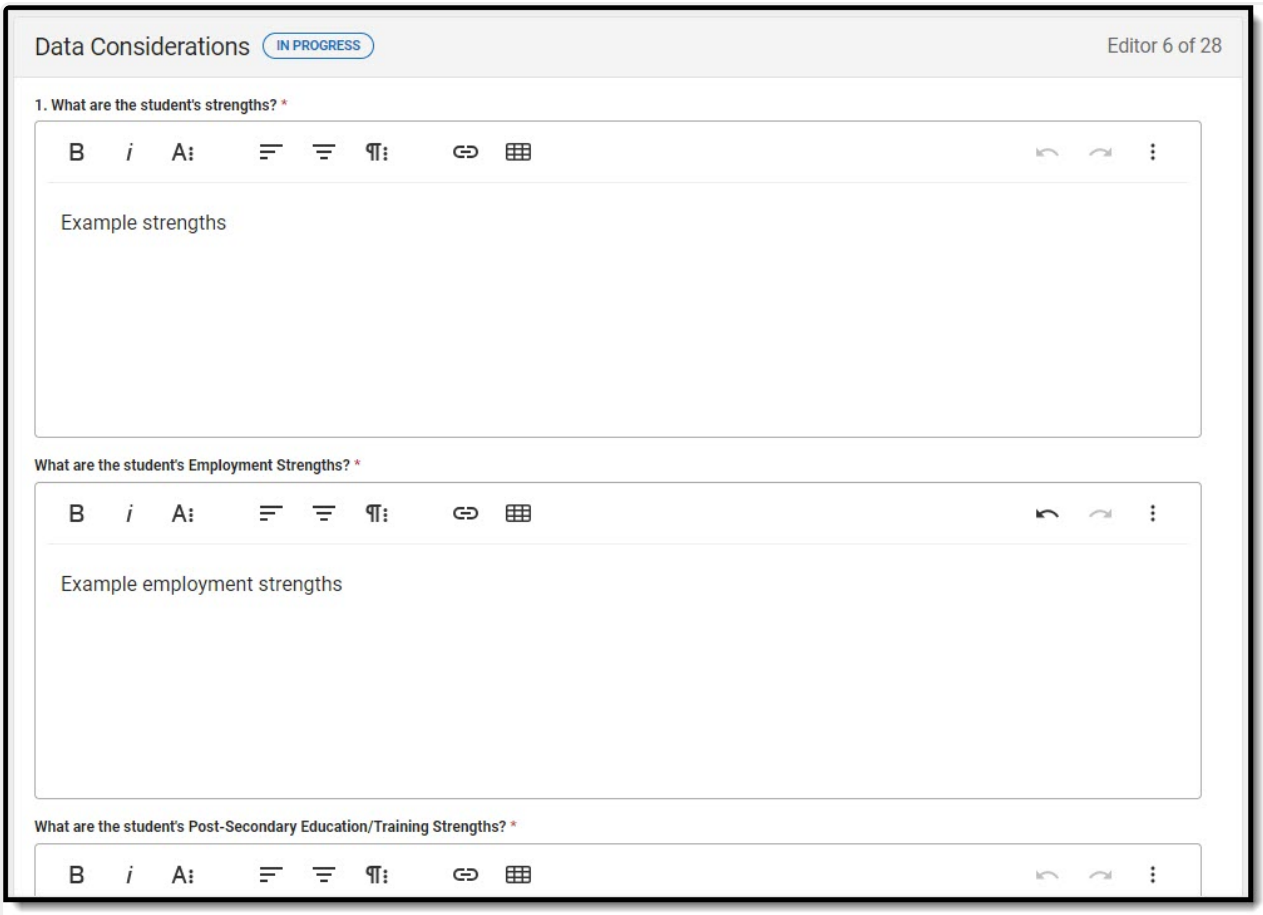
Click here to expand...

Field	Description	Validation
Print in Plan	Indicates this record prints.	This field defaults to unmarked.
Meeting Invite	The day of the meeting invitation.	This field populates from the locked Meeting Invitation document. Any locked Meeting Invitation types display in this dropdown.
Meeting Date *Read-only*	The day of the meeting.	This field populates from the selected Meeting Invitation document.
Invitation Date *Read-only*	The day of the invitation.	This field populates with the last Meeting Date from the selected Meeting Invitation document.
Meeting Location *Read-only*	The location of the meeting.	This field populates with the Meeting Location from the selected Meeting Invitation document.
Meeting Time *Read-only*	The time of the meeting.	This field populates with the Meeting Time from the selected Meeting Invitation document.

Field	Description	Validation
Meeting Purpose *Read-only*	The purpose of the meeting.	This field populates with the Purpose(s) from the selected Meeting Invitation document.
Attendance		
First Name	The first name of the team member.	This field populates from the Team Members on the selected Meeting Invitation.
Last Name	The last name of the team member.	This field populates from the Team Members on the selected Meeting Invitation.
Role Name	The role of the team member.	This field populates from the Team Members on the selected Meeting Invitation.

Data Considerations

The Data Considerations editor documents the student's strengths and data sources used to analyze the student's performance and the impact of the student's disability.



Data Considerations Editor

Click here to expand...

Field	Description	Validation
1. What are the student's strengths? *Required*	A description of the student's strengths.	N/A
What are the student's Employment Strengths? *Required*	A description of the student's employment strengths.	N/A
What are the student's Post-Secondary Education/Training Strengths? *Required*	A description of the student's secondary education/training strengths.	N/A

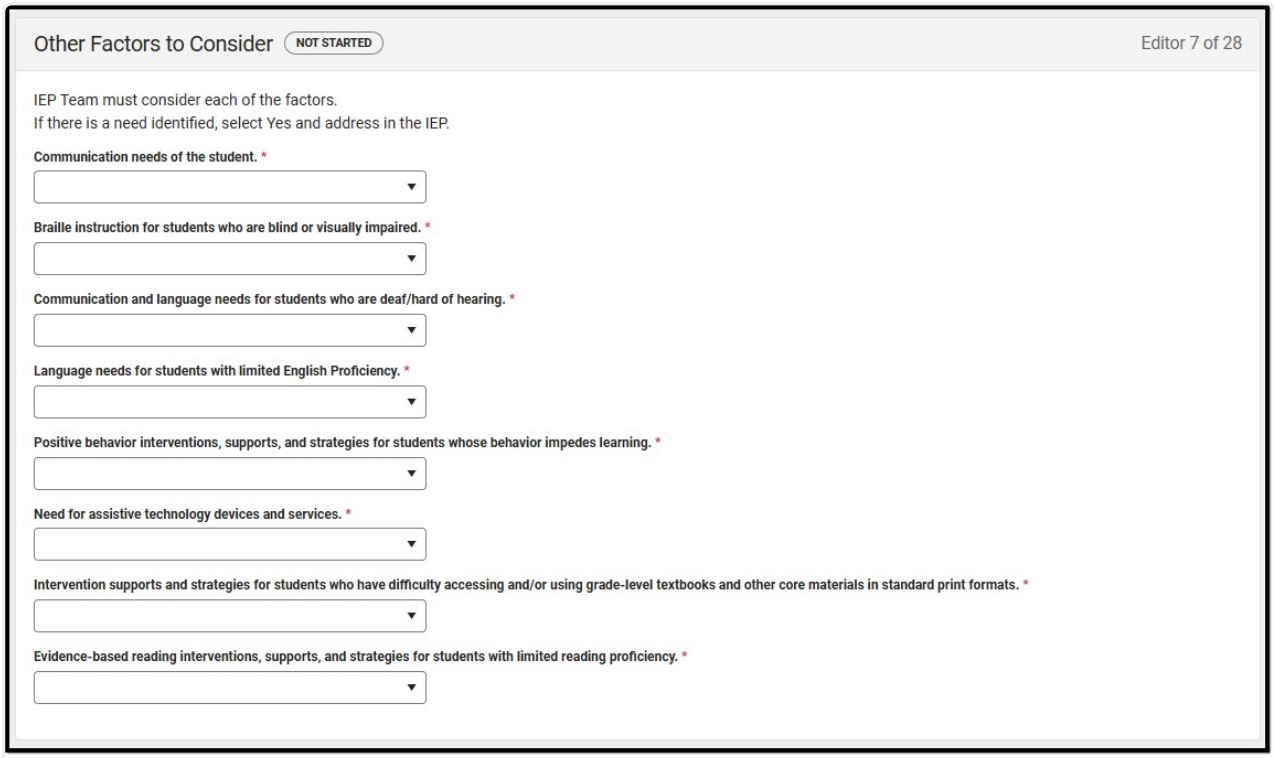
Field	Description	Validation
What are the student's Independent Living Strengths? *Required*	A description of the student's independent living strengths.	N/A
2. What are the educational concerns of the parent? *Required*	A description of the educational concerns of the parent.	
What are the educational concerns of the student, if appropriate?	A description of the educational concerns of the student.	N/A
3. What data sources and age appropriate transition assessments (including district or statewide assessments) are being used to create this IEP? *Required*	A description of the data sources included in creating the IEP.	N/A
What data sources and age appropriate transition assessments are being used to create this IEP? The following columns display: • Evaluation/Test Name • Date Administered Select an existing record or click New to open the side panel. The following fields display:		
Date Administered *Required*	The day the data source was administered.	N/A
Data Source *Required*	Options include: • Survey/Questionnaires • Profiles/Portfolios • Vocational Assessment • Student Success Plan • Other	N/A

Field	Description	Validation
Specify Other **Required*	The other Data Source.	*This field is available and required with Other is selected above. This field is limited to 200 characters.
Evaluation Test Name	The name of the test.	This field is limited to 200 characters.
4. How does the child's disability affect the child's involvement and progress in the general education curriculum? *Required*	A description of how the student's disability impacts their progress in the general education curriculum.	N/A
5. What are the child's other educational needs that result from the child's disability? *Required*	A description of the student's educational needs based on their disability.	N/A
6. Will the student participate with non-disabled students in extracurricular and non-academic areas? *Required*	Indicates the student will participate with non-disabled peers in extracurricular and non-academic areas. Options are Yes or No.	N/A

Field	Description	Validation
If yes, identify supports and services on the "Needs, Services and Annual Goals" page **Required*	A description of the supports and services needed for the student to participate with non-disabled peers in extracurricular and non-academic areas.	*This field is available and required when Yes is selected from "Will the student participate with non-disabled students in extracurricular and non-academic areas?" This field is required in order to Complete the editor.
If no, explain why the student will not participate with non-disabled students in extracurricular and non-academic areas **Required*	A description of why the student will not participate with non-disabled peers in extracurricular and non-academic areas.	*This field is available and required when No is selected from "Will the student participate with non-disabled students in extracurricular and non-academic areas?" This field is required in order to Complete the editor.
Braille?	Indicates the student requires Braille instruction.	N/A
If the IEP team has determined that Braille instruction is not appropriate at this time, provide a specific explanation of why such services are inappropriate **Required*	A description as to why Braille instruction is not appropriate for the student.	*This field is required when No is selected for the Braille question.

Other Factors to Consider

The Other Factors to Consider editor documents the areas the team considers when creating the student's plan.



Other Factors to Consider Editor

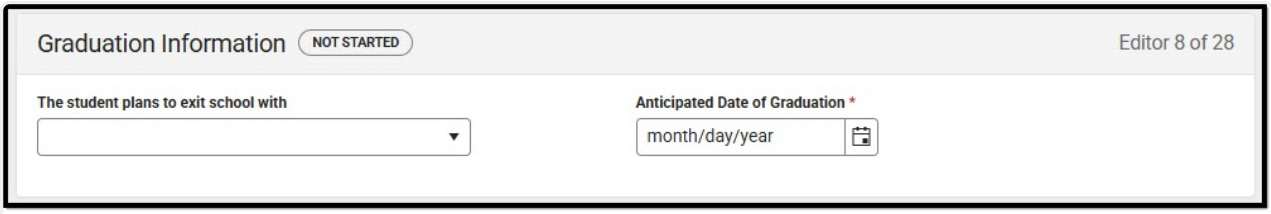
Click here to expand...

Field	Description
Communication needs of the student	Options are Yes or No.
Braille instruction for students who are blind or visually impaired	Options are Yes or No.
Communication and language needs for students who are deaf/hard of hearing	Options are Yes or No.
Language needs for students with limited English proficiency	Options are Yes or No.
Positive behavior interventions, supports, and strategies for student whose behavior impedes learning	Options are Yes or No.
Need for assistive technology devices and services	Options are Yes or No.

Field	Description
Intervention supports and strategies for students who have difficulty accessing and/or using grade-level textbooks and other core materials in standard print formats	Options are Yes or No.
Evidence-based reading interventions, supports, and strategies for students with limited reading proficiency	Options are Yes or No.

Graduation Information

The Graduation Information editor documents the student's anticipated graduation date and the type of diploma the student will receive.



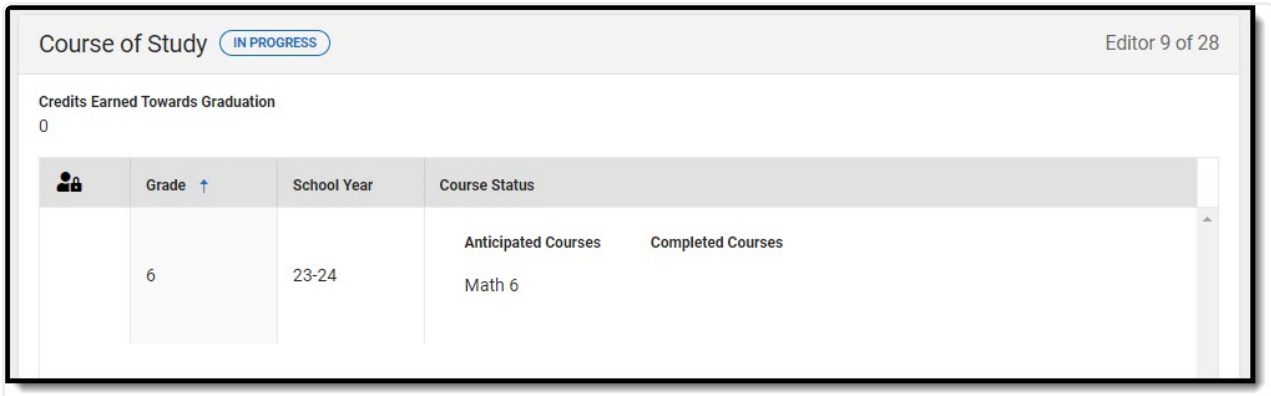
Graduation Editor

Field	Description	Validation
The student plans to exit school with	Options include: • Diploma • Diploma of Alternate Achievement Standards	N/A
Anticipated Date of Graduation *Required*	The student's anticipated graduation date.	N/A

Course of Study

The Course of Study editor documents the student's anticipated and completed courses for each of their school years.

When a new IEP is created for the student, the existing Course of Study entries are copied forward to the new plan.



Course of Study List Screen

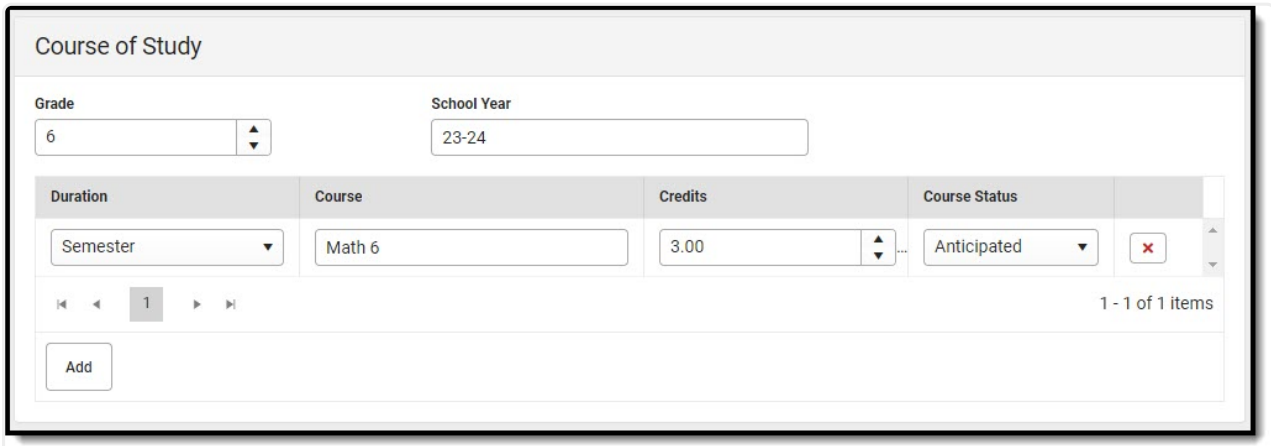
Click here to expand...

Course of Study List Screen

Column Name	Description
Credits Earned Towards Graduation Lists the total credits the student has earned towards their graduation.	
Padlock Icon	Indicates the person currently editing the record.
Grade	The student's grade.
School Year	The school year.
Course of Study	The anticipated and completed course for that school year.

Course of Study Detail Screen

Select an existing record or click New to open the detail screen.



Course of Study Detail Screen

Field	Description
Grade	The student's grade level.
School Year	The school year.
The following columns display in the table: • Duration • Course - This field is limited to 300 characters. • Credits • Course Status Select the Add button to add a new course record in-line.	

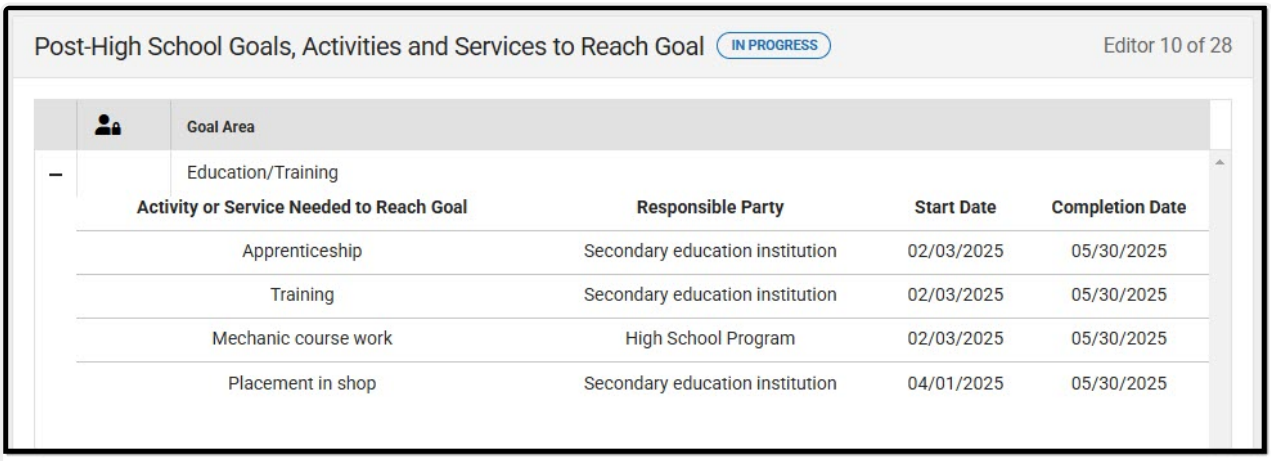
Post-High School Goals, Activities and Services to Reach Goal

The Post-High School Goals, Activities, and Services to Reach Goal editor documents the activity or service the student needs to achieve their goals.

To place this editor in a Complete status, 1 Employment activity and 1 Education and Training activity record must be saved. Records entered on this editor pull into the Progress Report.

Progress Report records display in the editor as read-only.

A Goal must be saved for each Goal Area in order to place this editor in a Complete status.



Activities and Services to Reach Goal List Screen

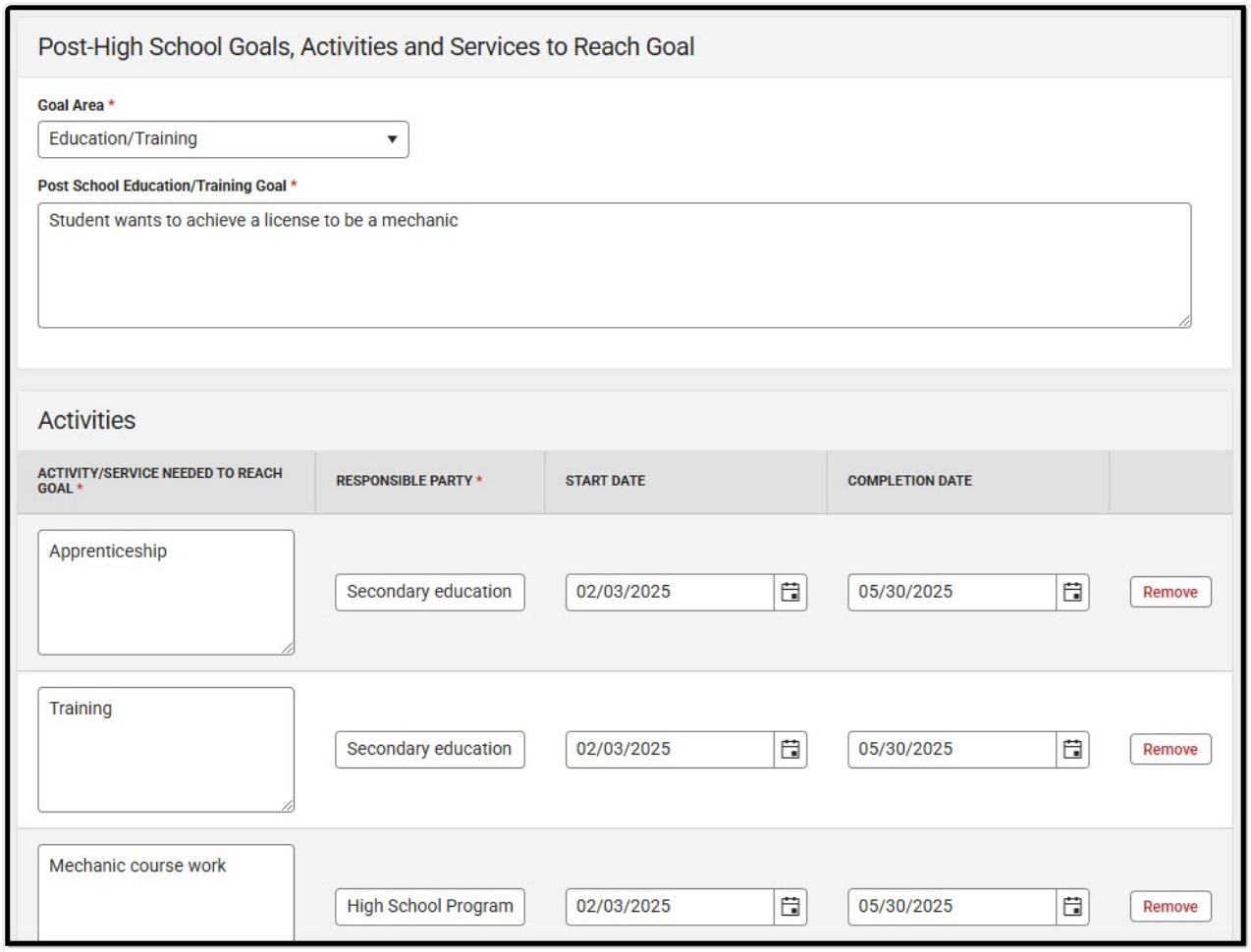
Click here to expand...

Activities and Services to Reach Goal

Column Name	Description
Padlock Icon	Indicates the person currently editing the record.
Goal Area	The area addressed by the activity/service.

Post-High School Goals, Activities and Services to Reach Goal

Select an existing record or click **New** to open the detail screen.



Post-High School Goals, Activities and Services to Reach Goal Detail Screen

Field	Description	Validation
Goal Area *Required*	The area addressed by the goal. Options include: • Employment • Education/Training • Independent Living	N/A

Field	Description	Validation
Post School [Goal Area Name] Goal *Read-Only*	The specific goal of the student.	The name of this field changes based on the selection in the Goal Area dropdown. This field is limited to 8000 characters.
Activities Four records must be created per Goal Area to Save the record.		
Activities/Services Needed to Reach Goal *Required*	The activity or service.	This field is limited to 8000 characters.
Responsible Party *Required*	The agency or person responsible for administering the activity or service.	This field is limited to 100 characters.
Start Date	The first day of the activity or service.	N/A
Completion Date	The last day of the activity or service.	N/A

{{snippet.Expand_End}}

Interagency Supports

The Interagency Supports editor documents the contacts for outside agencies responsible for administering support for the student.



Interagency Supports List Screen

Click here to expand...

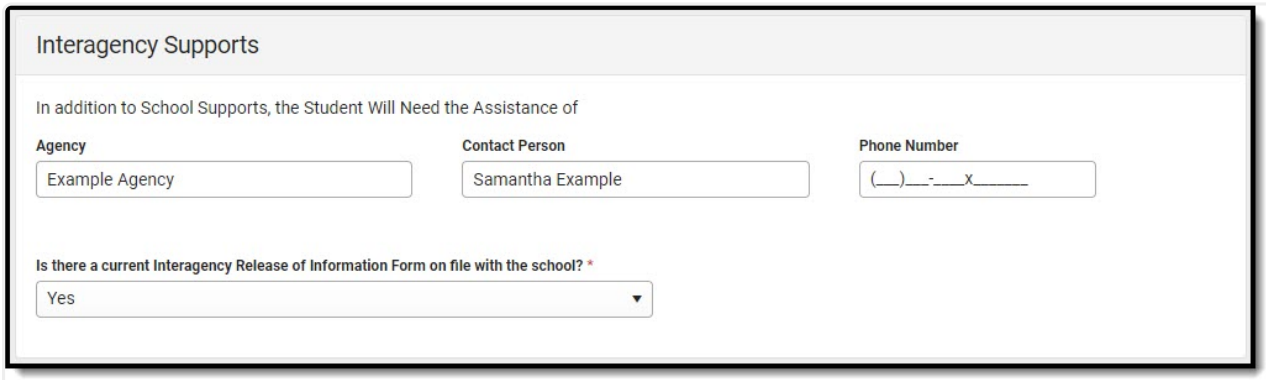
Interagency Supports List Screen

Column Name	Description
Padlock Icon	Indicates the person currently editing the record.

Column Name	Description
Agency	The name of the agency.
Release of Information	Indicates there is an Interagency Release of Information Form on file with the school.

Interagency Supports Detail Screen

Select an existing record or click New to open the detail screen.

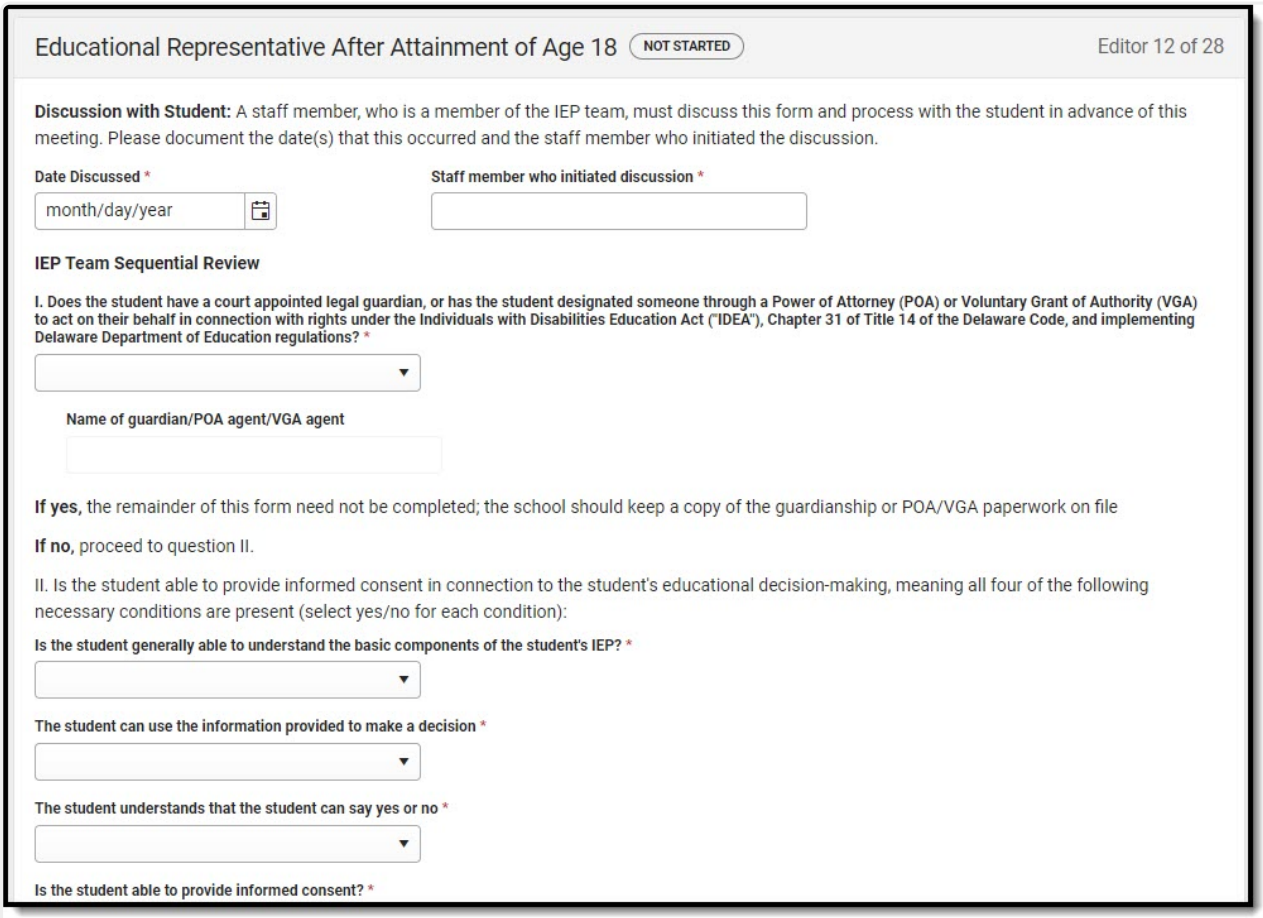


Interagency Supports Detail Screen

Field	Description	Validation
Agency	The name of the agency.	This field is limited to 200 characters.
Contact Person	The name of the agency contact.	This field is limited to 200 characters.
Phone Number	The agency contact's phone number.	N/A
Is there a current Interagency Release of Information Form on file with the school? *Required*	Indicates there is an Interagency Release of Information Form on file with the school. Options include: • Yes • No (if no, discuss form for transition planning with appropriate agencies) • Parent/Student chose to refuse services	N/A

Educational Representative After Attainment Age 18

The Educational Representative After Attainment Age 18 editor documents the student's legal guardian, power-of-attorney, or voluntary grant of authority agent responsible for acting on their behalf in connection with rights under the Individuals with Disabilities Education Act (IDEA) and implementing the Delaware Department of Education regulations for them.



Educational Representative After Attainment of Age 18 Editor

Click here to expand...

Field	Description	Validation
Date Discussed *Required*	The day the staff member discussed the form and process with the student prior to this meeting.	N/A
Staff member who initiated discussion *Required*	The staff member who discussed the form and process with the student prior to this meeting.	This field is limited to 100 characters.

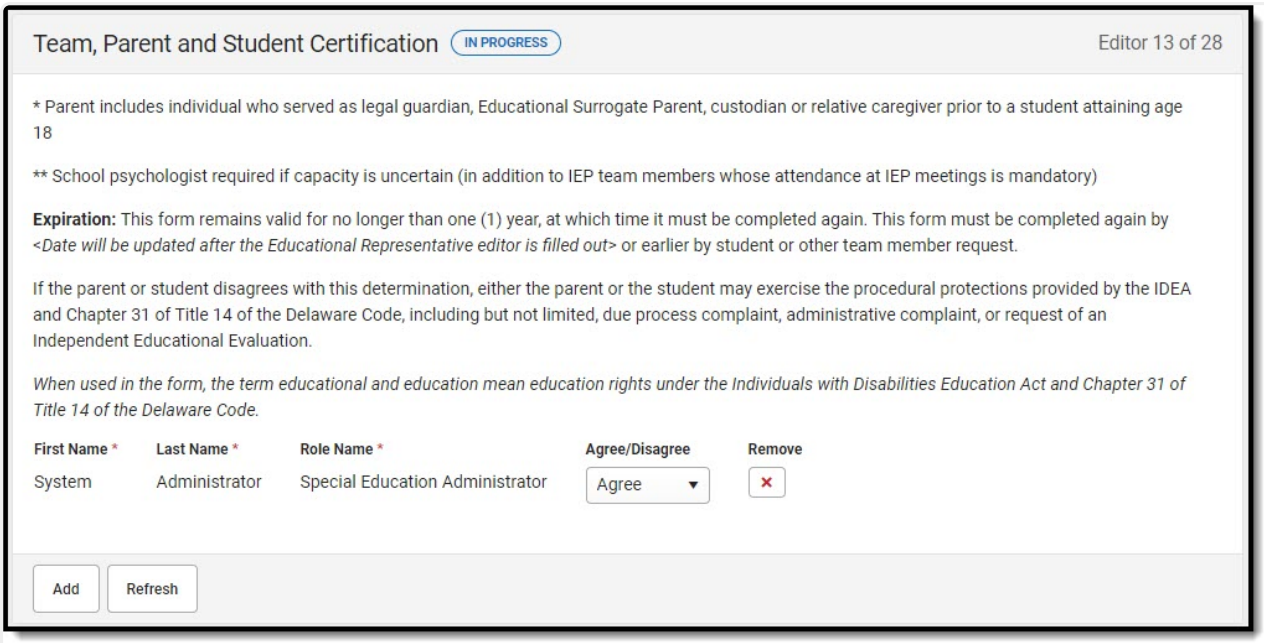
Field	Description	Validation
I. Does the student have a court appointed legal guardian, or has the student designated someone through a Power of Attorney (POA) or Voluntary Grant of Authority (VGA) to act on their behalf in connection with rights under the Individuals with Disabilities Education Act ("IDEA"), Chapter 31 of Title 14 of the Delaware Code, and implementing Delaware Department of Education regulations? *Required*	Indicates the student has a legal guardian or designated person to act on their behalf. Options are Yes or No.	When Yes is selected, the rest of this editor becomes unavailable except the Name of Guardian/POA Agent/ VGA Agent field.
Name of Guardian/POA Agent/VGTA Agent **Required*	The name of the student's legal guardian, power-of-attorney, or voluntary grant of authority agent.	This field is available and required when Yes is selected for question I.
II. **Is the student able to provide informed consent in connection to the student's educational decision-making, meaning all four of the following necessary conditions are present** *Required*	Indicates the student can provide informed consent on their own behalf. Options are Yes or No.	N/A
Is the student generally able to understand the basic components of the student's IEP? *Required*	Options are Yes or No.	N/A
The student can use the information provided to make a decision.	Options are Yes or No.	N/A
The student understands that the student can say yes or no	Options are Yes or No.	N/A

Field	Description	Validation
Is the student able to provide informed consent?	Options are Yes or No.	N/A
III. Briefly describe the team's discussion of the determination. Include the data sources (e.g., student and staff interviews, classroom observations, district and statewide assessments, etc.) being reviewed to assist the discussion *Required*	A description of the team's discussion.	This field is limited to 8000 characters.
IV. If the student is presently able to provide informed consent, is there a parent or other individual(s) who have knowledge or special expertise, who the student would like to invite to future IEP meetings? *Required*	Indicates the student has someone they would like to invite to future IEP meetings. Options are Yes or No.	
Specify name of individual **Required*	The name of the person to invite to future IEP meetings.	*This field is available and required when Yes is selected for question IV. This field is limited to 100 characters.
Does the student want the above named individual to receive duplicate copies of educational-related records?	Options are Yes or No.	N/A

Field	Description	Validation
V. If the student is not able to provide informed consent, is there a willing and available parent, or other adult relative, who can serve as Educational Representative, to represent the educational interests of the student throughout the student's eligibility under the Individuals with Disabilities Education Act	Indicates the student has a parent or adult relative who can serve as their Educational Representative. Options include: • Yes • No, the district, charter or public agency will notify the Department of Education of student need for an Educational Representative. The Department of Education will appoint an individual through the Educational Surrogate Parent program.	Only one option can be selected.
Specify name of individual	The name of the student's parent or other adult relative serving as their Educational Representative.	*This field is available and required when Yes is selected for question V. This field is limited to 100 characters.
Date of Certification *Required*	The day the parent/guardian/surrogate agrees to act on the student's behalf.	The name of the parent/guardian/surrogate pulls in from the Parent/Guardian Information editor as read-only in the information text above the date field.

Team, Parent and Student Certification

The Team, Parent, and Student Certification editor documents the team's, parent/guardian's, and student's agreement or disagreement with the determination documented in this plan.



Team, Parent, and Student Certification Editor

Unique Needs/Present Levels/Annual Goals and Benchmarks

The Unique Needs/Present Levels/Annual Goals and Benchmarks editor includes the student's present levels of academic achievement and functional performance, including the assessment conducted to determine the level, resulting skills determined, and needs identified. This also includes goals and benchmarks.



Unique Needs/Present Levels/Annual Goals and Benchmarks List Screen

Click here to expand...

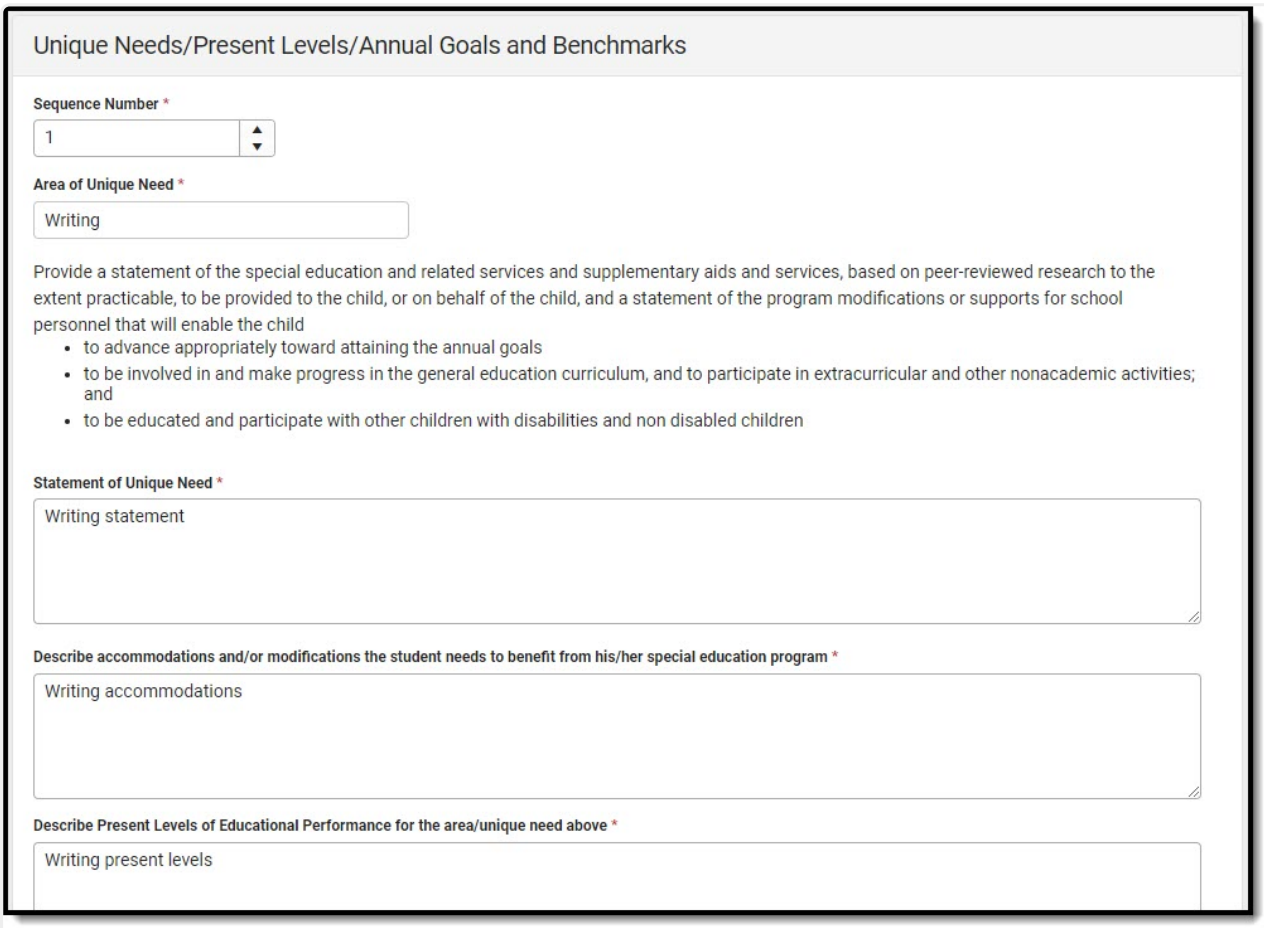
Unique Needs/Present Levels/Annual Goals and Benchmarks List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.

Column Name	Description
Area of Unique Need	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.
Statement of Unique Need	The type of special education service, supplementary aids and support, and program modification or support.

Unique Needs/Present Levels/Annual Goals and Benchmarks Detail Screen

Select an existing record or click **New** to view the detail screen.



Unique Needs/Present Levels/Annual Goals and Benchmarks Detail Screen

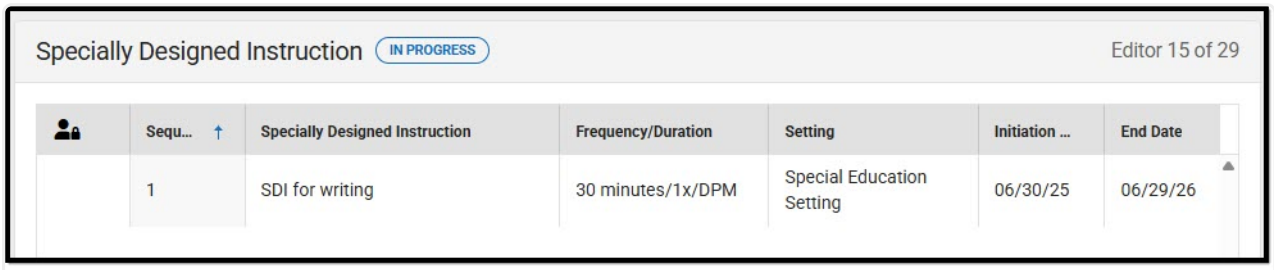
Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.

Field	Description	Validation
Area of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field is limited to 100 characters.
Statement of unique need *Required*	The type of special education service, supplementary aids and support, and program modification or support.	This field is limited to 8000 characters.
Describe accommodations and/or modifications the student needs to benefit from his/her special education program *Required*	A description of the accommodation or modification.	This field is limited to 8000 characters.
Describe Present Levels of Educational Performance for the area/unique need above *Required*	A description of the student's current level of educational performance.	This field is limited to 8000 characters.
Measurable Annual Goals and Benchmarks This side panel displays when selecting an existing record or clicking the **New** button.		
Area of Unique Need *Read-only*	Displays the values entered into the "Area of Unique Need" field.	N/A
Present levels of Educational Performance *Read-only*	Displays the values entered into the "Describe Present Levels of Educational Performance for the area/unique need above" field.	N/A
Annual Goal		
Sequence Number	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
ESY	This indicates that this area is part of an extended school year program.	When marked, the goal pulls into the ESY editor as read-only.
Reading ESY	Indicates the ESY program is for reading.	N/A

Field	Description	Validation
Related Service Goal	This indicates that this area is part of a related service goal.	When marked, the Related Service editor is required and cannot be placed in a Not Needed status.
Annual Goal *Required*	A description of the goal.	This field is limited to 8000 characters.
Benchmarks		
Sequence Number *Required*	The order of the record.	N/A
Benchmark *Required*	The standard the student must achieve to make progress toward the annual goal.	This field is limited to 2000 characters.
Marking Period	The terms associated with the enrollment for the active IEP.	This pulls from Calendar Setup.
Progress The following fields display as read-only when a Progress Report document is created for this student's goals. • Progress • Date Progress Reported • Optional Narrative		

Specially Designed Instruction

The Specially Designed Instruction editor lists services for the student in a Special Education setting.



Specially Designed Instruction List Screen

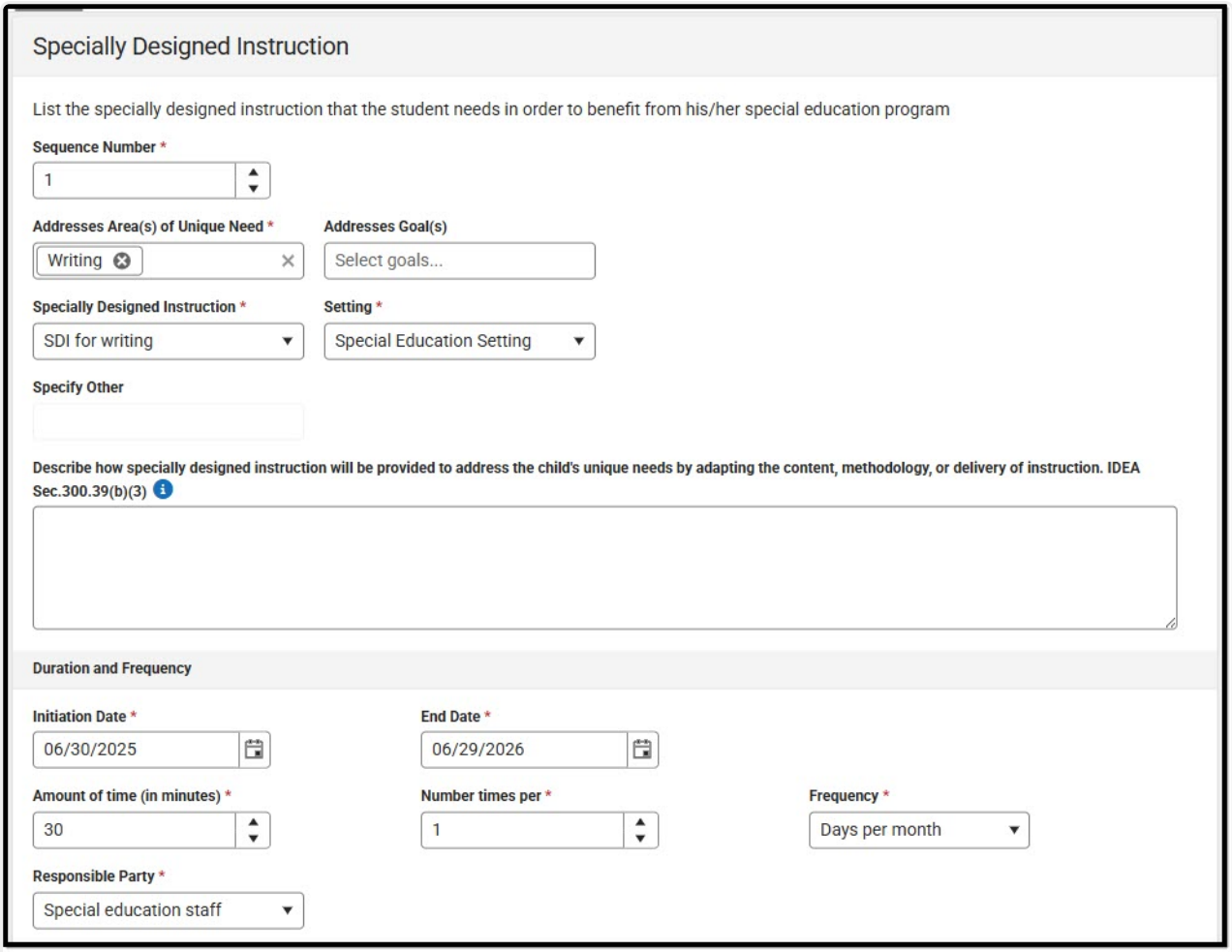
Click here to expand...

Specially Designed Instruction List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Specially Designed Instruction	The service provided to the student.
Frequency/Duration	The amount of time the student requires the service.
Setting	The location of service.
Related Service	Indicates this is a related service.
Initiation Date	The first day of service.
End Date	The last day of service.

Specially Designed Instruction Detail Screen

Select an existing record or click **New** to view the detail screen.



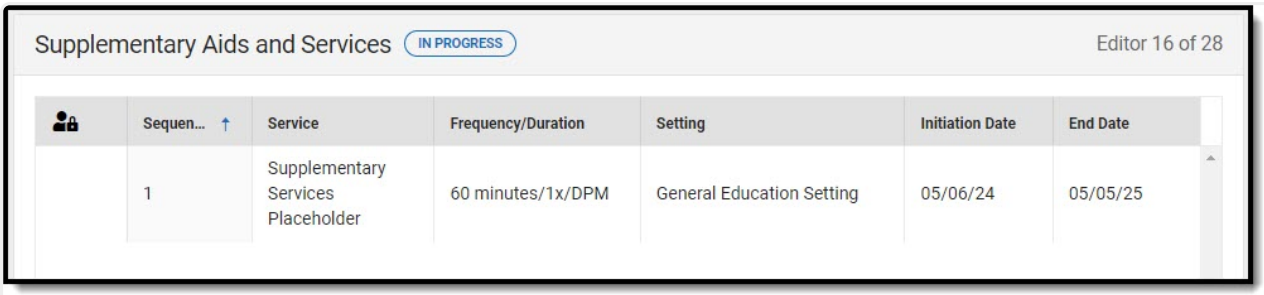
Specially Designed Instruction Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Addresses Area(s) of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Addresses Goal(s)	A description of the goal.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Specially Designed Instruction *Required*	The service provided to the student. Options include: • SDI for reading • SDI for math • SDI for writing • SDI for behavior • SDI for social/emotional skills • SDI for executive functioning • SDI for speech and/or language • SDI for occupational therapy • SDI for other	N/A
Specify Other **Required*	A description of the other service provided to the student.	*This field is available and required when SDI for other is selected as the Specially Designed Instruction. This field is limited to 150 characters.
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A
Describe...	A description of how the specially designed instruction addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		

Field	Description	Validation
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	N/A
Responsible Party *Required*	The person responsible for administering the service. Options include: • Special education staff • Regular education staff • Regular and special education staff	N/A

Supplementary Aids and Services

The Supplementary Aids and Services editor lists the accommodations and modifications made to assist the student in participating in regular education.



Supplementary Aids and Services List Screen

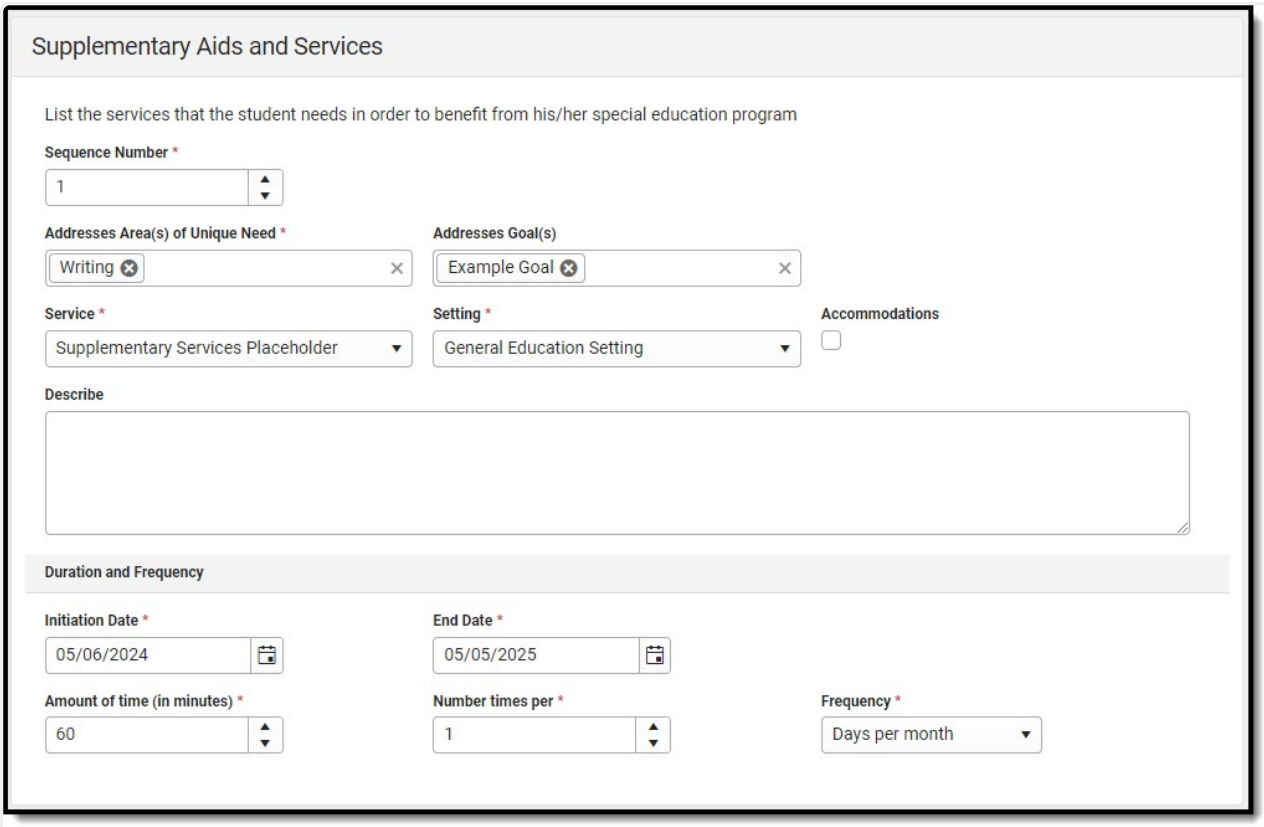
Click here to expand...

Supplementary Aids and Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Frequency/Duration	The amount of time the student receives services.
Setting	The location of service.
Initiation Date	The first day of service.
End Date	The last day of service.

Supplementary Aids and Services Detail Screen

Select an existing record or click **New** to view the detail screen.



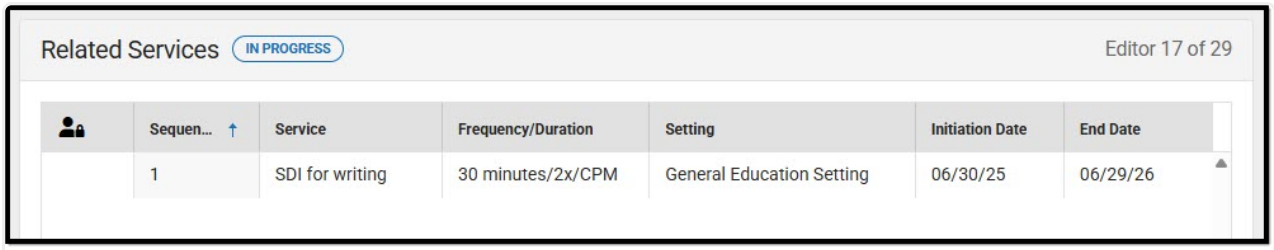
Supplementary Aids and Services Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Addresses Area(s) of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Addresses Goal(s)	A description of the goal.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Service *Required*	The service provided to the student.	N/A
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A

Field	Description	Validation
Accommodations	Any accommodations for the service.	N/A
Describe...	A description of how the supplementary aids and services addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	N/A

Related Services

The Related Services editor documents any related services the student requires.



Related Services List Screen

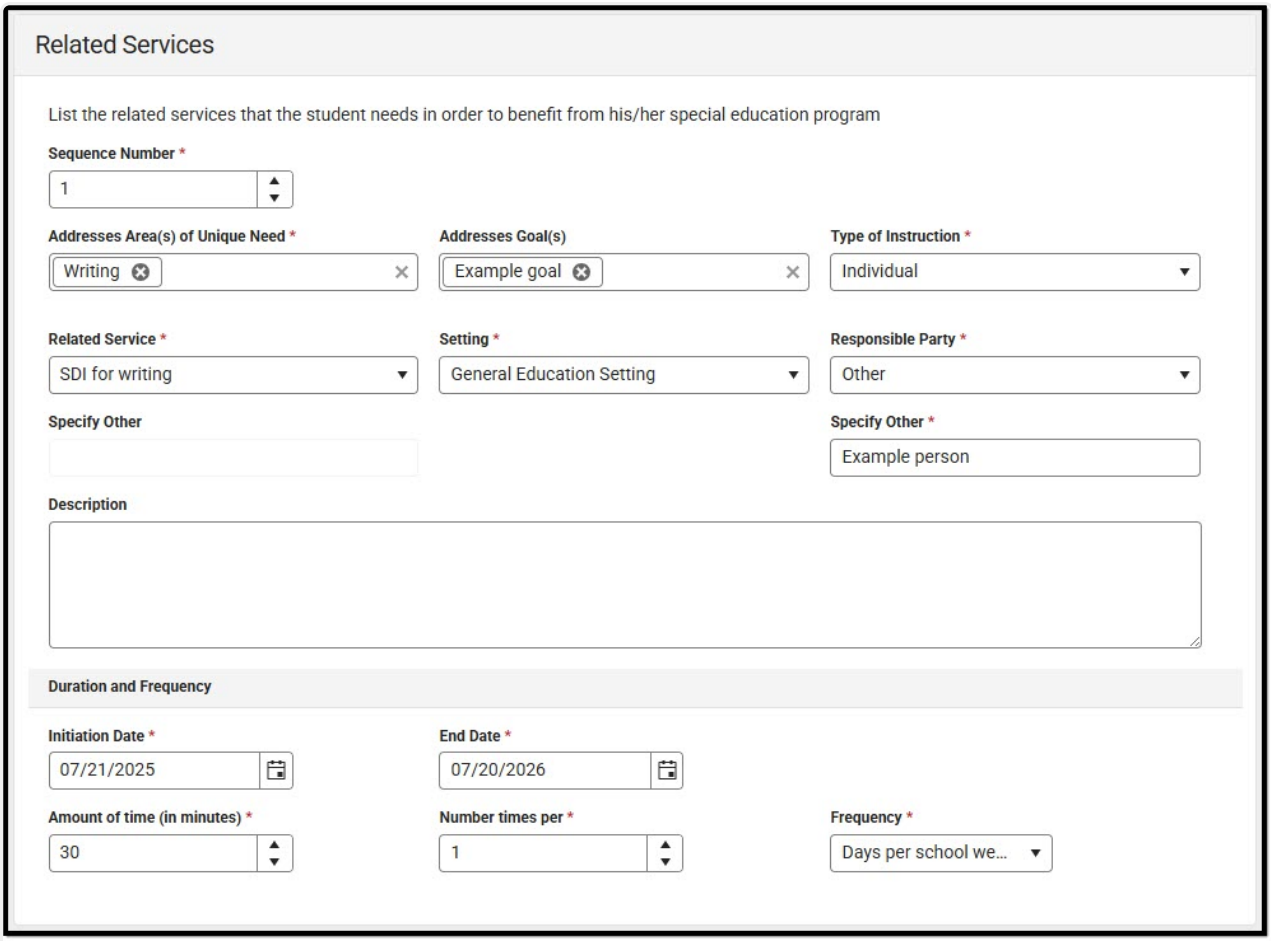
Click here to expand...

Related Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Frequency/Duration	The amount of time the student receives services.
Setting	The location of the service.
Initiation Date	The first day of the service.
End Date	The last day of the service.

Related Services Detail Screen

Select an existing record or click **New** to view the detail screen.



Related Services Detail Screen

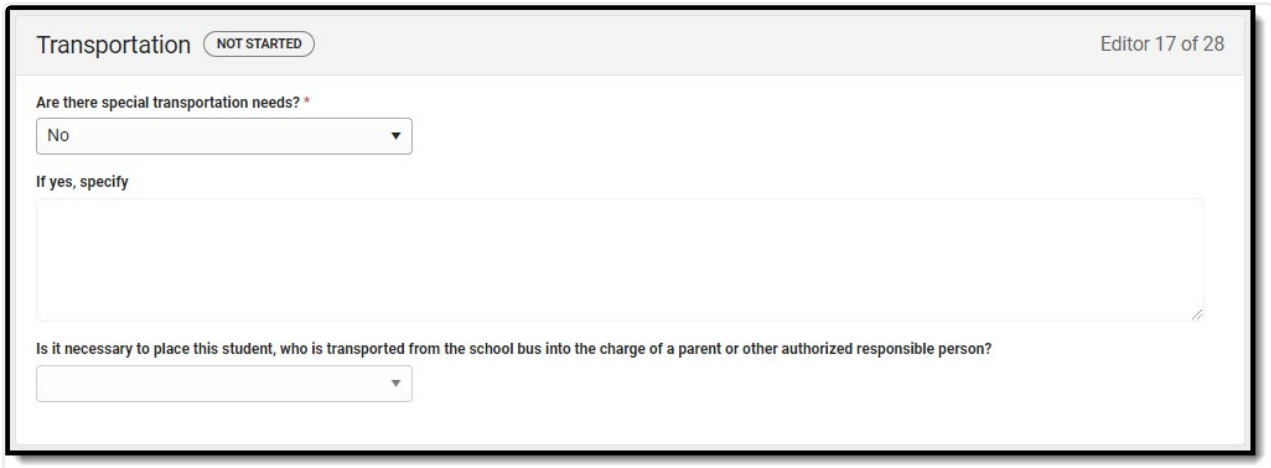
Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Addresses Area(s) of Unique Need *Required*	The area where the student requires special education services, supplementary aids and supports, and program modification or supports.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Addresses Goal(s)	A description of the goal.	This field populates with the Areas of Unique Need from the Unique Needs/Present Levels/Annual Goals and Benchmarks editor.
Type of Instruction *Required*	The type of instruction. Options include: • I: Individual • G: Group • C: Consult	**Ad hoc inquiries**: deServices.instructionType

Field	Description	Validation
Related Service *Required*	The service provided to the student.	**Ad hoc inquiries**: deServices.relatedServices
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	**Ad hoc inquiries**: deServices.Setting
Responsible Party *Required*	Options include: • Audiologist • School Psychologist • School Counselor • Social Worker • Interpreter • Occupational Therapist • Orientation and Mobility Specialist • Physical Therapist • DVR Staff • DDDS Staff • Speech Language Pathologist • School Nurse • DVI Staff • Other	**Ad hoc inquiries:** deServices.responsibleParty
Specify Other **Required*	The other responsible party.	*This field is available and required when Other is selected as the Responsible Party.
Description	A description of how the supplementary aids and services addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters. **Ad hoc inquiries**: deServices.description
Duration and Frequency		
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed. **Ad hoc inquiries:** deServices.startDate

Field	Description	Validation
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed. **Ad hoc inquiries:** deServices.endDate
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	**Ad hoc inquiries:** deServices.time
Number times per *Required*	The number of times the student receives the service.	**Ad hoc inquiries:** deServices.numberTimes
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	**Ad hoc inquiries:** deServices.frequencyPeriod

Transportation

The Transportation editor is used to document the student's transportation needs.



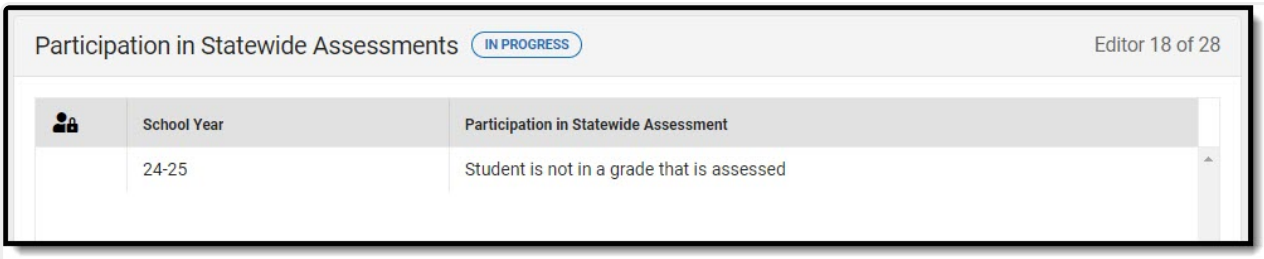
Transportation Editor

Click here to expand...

Field	Description	Validation
Are there special transportation needs? *Required*	Indicates the student requires additional transport services. Options are Yes or No.	N/A
If yes, specify **Required*	A description of the transportation service needs of the student.	*This field is available and required when Yes is selected for the Are there special transportation needs? question.
Is it necessary to place this student, who is transported from the school bus into the charge of a parent or other authorized responsible person?	Indicates the student must be placed in the care of a guardian or responsible person after transport. Options are Yes or No.	N/A

Participation in Statewide Assessments

The Participation in Statewide Assessments editor documents how the student will participate in statewide assessments.



Participation in Statewide Assessments List Screen

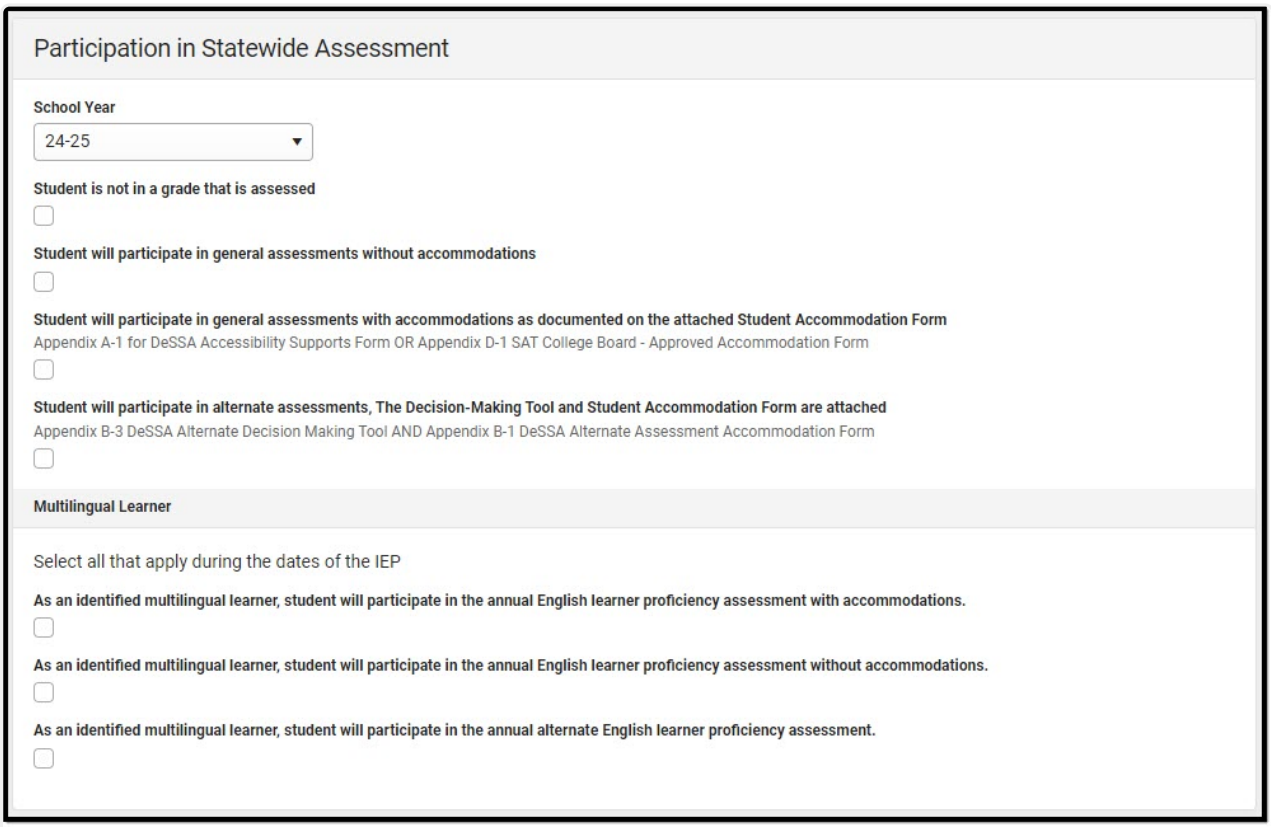
Click here to expand...

Participation in Statewide Assessments List Screen

Column Name	Description
Padlock Icon	Indicates the person currently editing the record.
School Year	The school year in which the assessment is taken.
Participation in Statewide Assessment	Indicates how the student participates in the statewide assessment.

Participation in Statewide Assessments Detail Screen

Select an existing record or click the **New** button to view the detail screen.

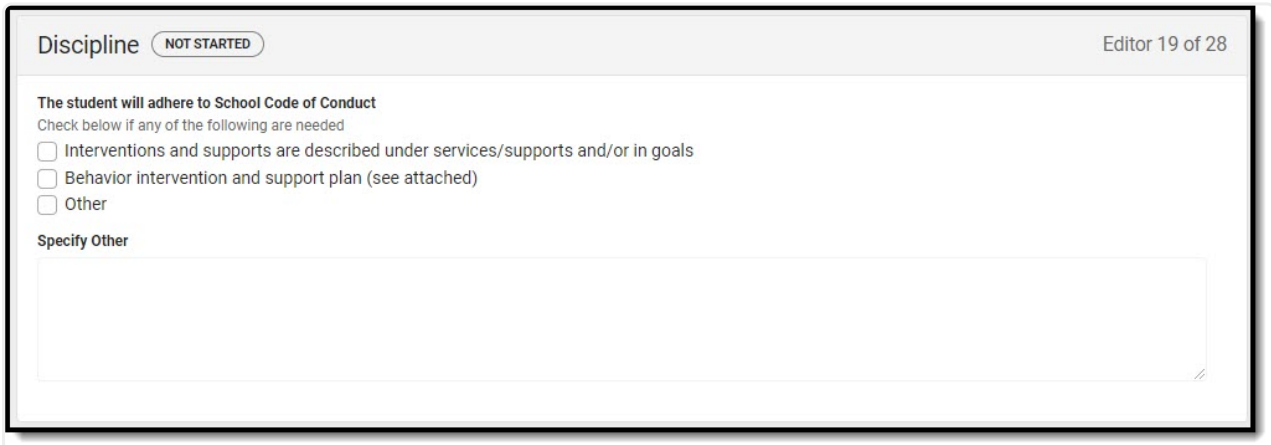


Participation in Statewide Assessment Detail Screen

Field	Description	Validation
School Year	The school year in which the assessment is taken.	N/A
Student is not in a grade that is assessed	Indicates the student is not in the grade assessed.	Only one of the four checkboxes can be selected.
Student will participate in general assessments without accommodations	Indicates the student will take the assessment without accommodations.	Only one of the four checkboxes can be selected.
Student will participate in general assessments with accommodations as documented on the attached Student Accommodation Form	Indicates the student requires accommodations to participate in the assessment.	Only one of the four checkboxes can be selected.
Student will participate in alternate assessments, The Decision-Making Tool and Student Accommodation Form are attached	Indicates the student requires an alternate assessment.	Only one of the four checkboxes can be selected.
Multilingual Learner		
As an identified multilingual learner, student will participate in the annual English learner proficiency assessment with accommodations	Indicates the student will participate in the annual English proficiency assessment with accommodations.	N/A
As an identified multilingual learner, student will participate in the annual English learner proficiency assessment without accommodations	Indicates the student will participate in the annual English proficiency assessment without accommodations.	N/A
As an identified multilingual learner, student will participate in the annual alternate English learner proficiency assessment	Indicates the student will participate in the annual alternate English proficiency assessment.	N/A

Discipline

The Discipline editor is used to note the student's adherence to the school's code of conduct.



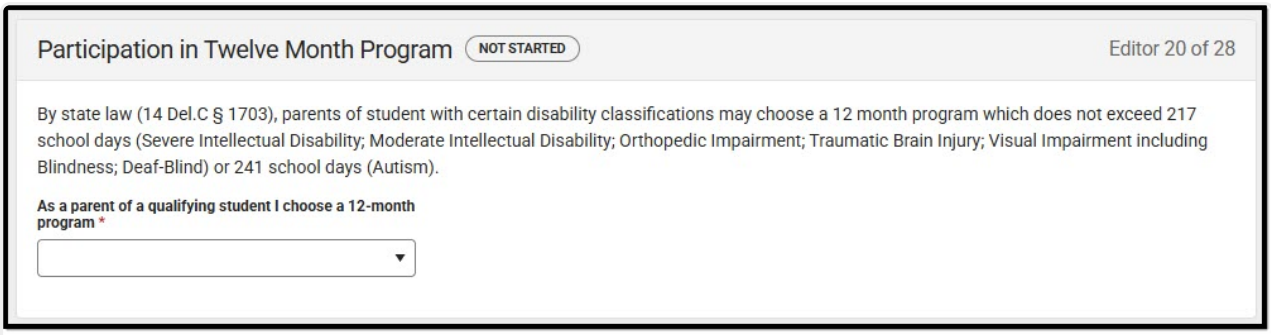
Discipline Editor

Click here to expand...

Field	Description	Validation
The student will adhere to School Code of Conduct	Options include: • Interventions and supports are described under services/supports and/or in goals • Behavior intervention and support plan (see attached) • Other	Mark all that apply.
Specify Other *Required*	A description of what other supports the student may need to follow the school code of conduct.	*This field is available and required when Other is selected above. This field is limited to 8000 characters.

Participation in Twelve Month Program

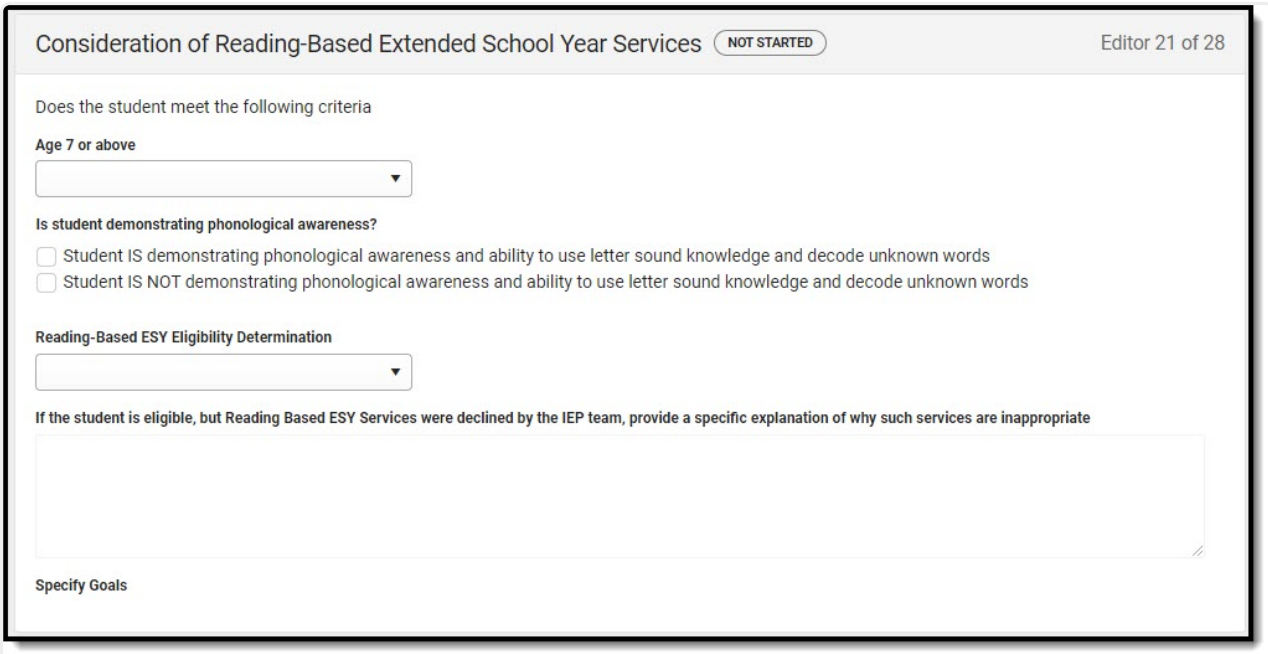
The Participation in Twelve-Month Program editor indicates the parent has chosen a twelve-month program for their student. Options are Yes, No, or Not Applicable.



Participation in Twelve Month Program Editor

Consideration of Reading-Based Extended School Year Services

The Consideration of Reading-Based Extended School Year Services editor documents the student's need for an ESY reading program.



Consideration of Reading-Based Extended School Year Services Editor

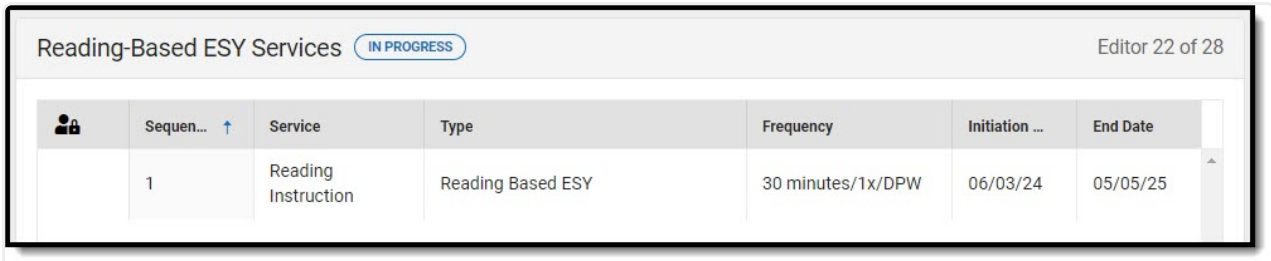
Click here to expand...

Field	Description	Validation
Age 7 or above	Indicates the student is age 7 or older. Options are: • Student IS age 7 or above • Student IS NOT 7 or above	N/A

Field	Description	Validation
Is student demonstrating phonological awareness?	Indicates the student is demonstrating phonological awareness. Options are: • Student IS demonstrating phonological awareness and ability to use letter sound knowledge and decode unknown words • Student IS NOT demonstrating phonological awareness and ability to use letter sound knowledge and decode unknown words	N/A
Reading-Based ESY Eligibility Determination	Indicates the student's reading-based extended school year eligibility determination. Options are: • Eligible • Eligible, but declined by parent • Eligible, but declined by IEP team • Not eligible	N/A
If the student is eligible, but Reading Based ESY Services were declined by the IEP team, provide a specific explanation of why such services are inappropriate **Required*	A description of why these services are inappropriate for this student.	*This field is available and required when "Eligible, but declined by IEP team" is selected above. This field is limited to 8000 characters.
Specify Goals	The specific reading goals for the student.	*This field is available and required when Eligible is selected above. This field is limited to 8000 characters.

Reading-Based ESY Services

The Reading-Based ESY Services editor documents the services provided to the student in an Extended School Year program.



Reading-Based ESY Services List Screen

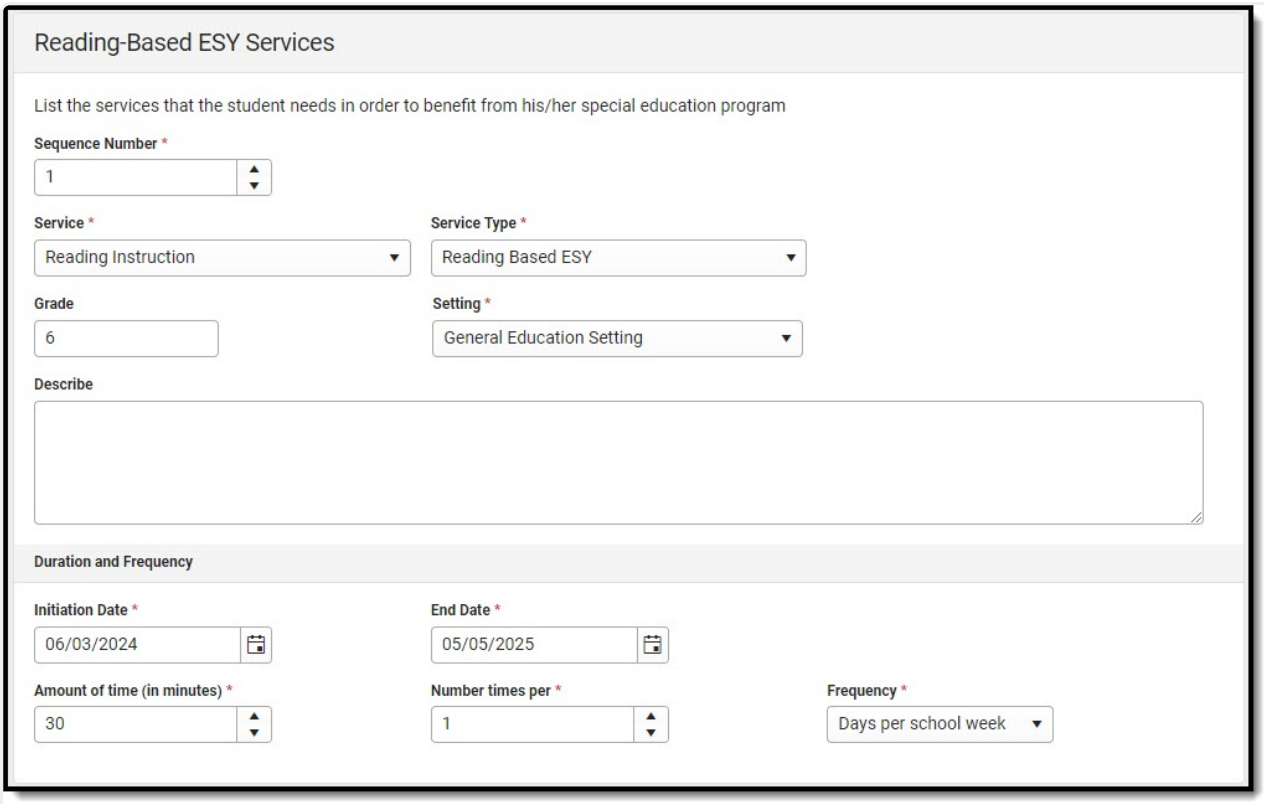
Click here to expand...

Reading-Based ESY Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Type	The type of service.
Frequency	The amount of time the student receives services.
Initiation Date	The first day of service.
End Date	The last day of service.

Reading-Based ESY Services Detail Screen

Select an existing record or click **New** to view the detail screen.



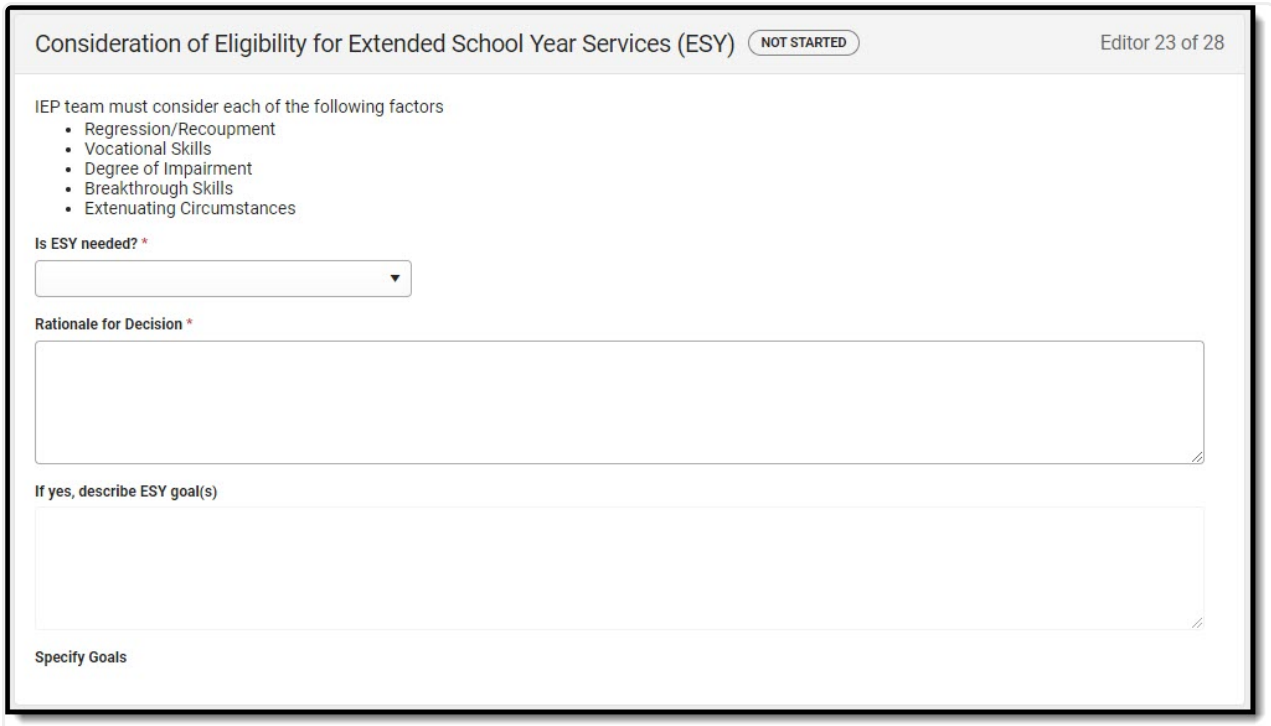
Reading-Based ESY Services Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.
Service *Required*	The service provided to the student. The only option is Reading Instruction.	N/A
Service Type *Required*	The type of service. The only option is Reading-Based ESY.	N/A
Grade	The student's grade.	N/A
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A
Describe	A description of how the service addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		

Field	Description	Validation
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per day • Sessions per week • Times per marking period	N/A

ESY

The Extended School Year editor indicates the student requires services beyond the standard school time, such as beyond school hours or during breaks.



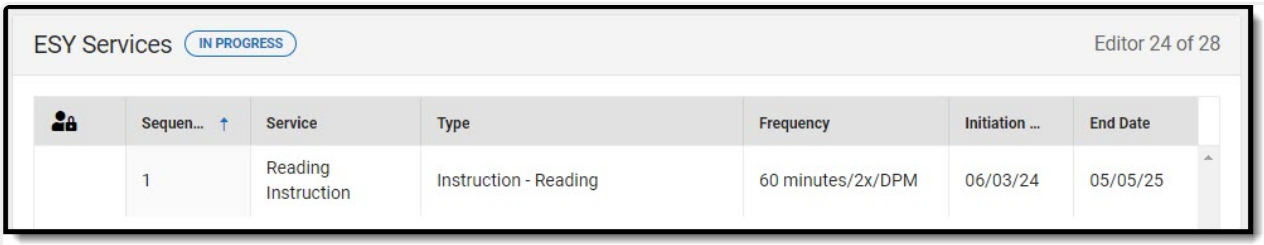
Extended School Year Editor

Click here to expand...

Field	Description	Validation
Is ESY needed? *Required*	Indicates ESY is needed. Options include: • Yes • No • ESY offered, but declined by parent	N/A
Rationale for Decision *Required*	A description of the decision rationale.	This field is limited to 8000 characters.
If yes, describe ESY goal(s) **Required*	A description of the ESY goals.	*This field is available and required when Yes is selected from the "Is ESY needed" dropdown. This field is limited to 8000 characters.
Specify Goals *Read-only*	A read-only view of the ESY Goal.	N/A

ESY Services

The Extended School Year Services editor documents the ESY services provided to the student.



ESY Services List Screen

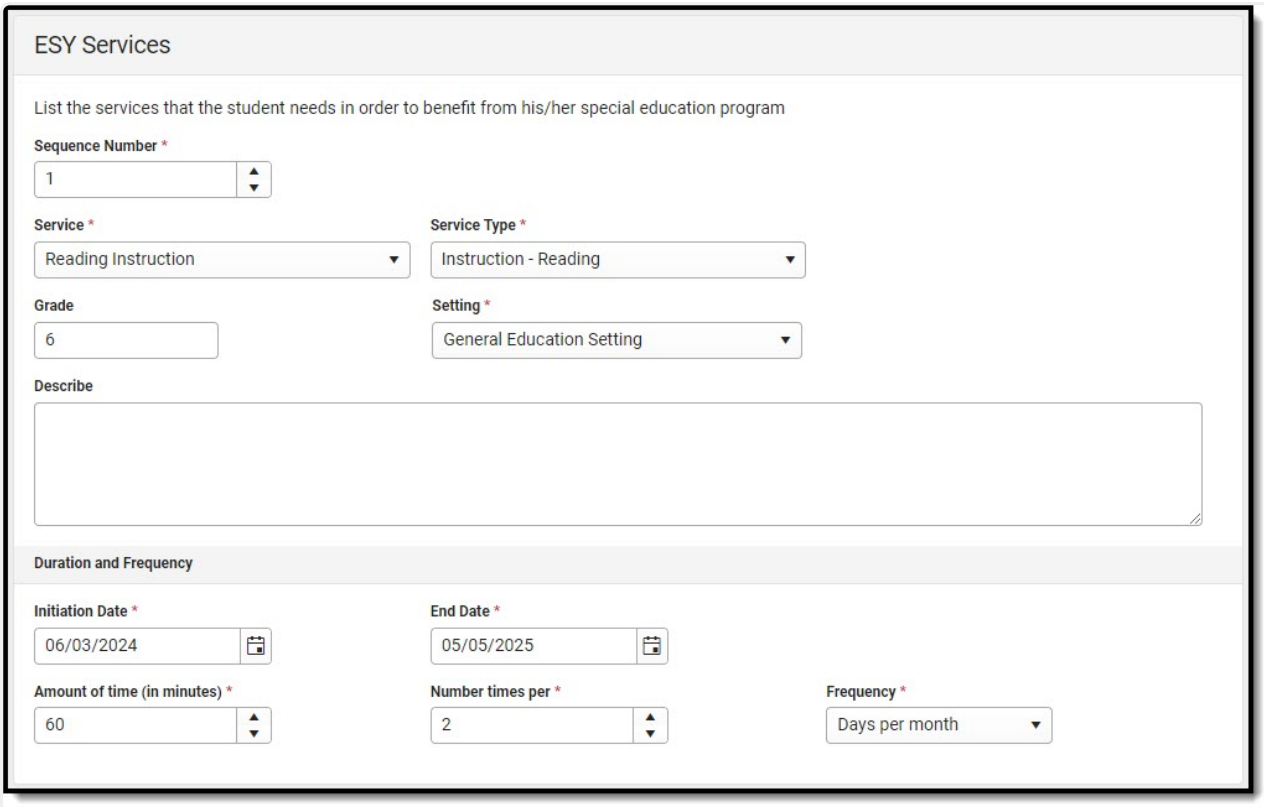
Click here to expand...

ESY Services List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Sequence	The order of the record.
Service	The service provided to the student.
Type	The type of service.
Frequency	The amount of time the student requires the service.
Initiation Date	The first day of service.
End Date	The last day of service.

ESY Services Detail Screen

Select an existing record or click **New** to view the detail screen.



ESY Services Detail Screen

Field	Description	Validation
Sequence Number *Required*	The order of the record.	This field automatically sequences for each new entry. Each sequence number must be unique.

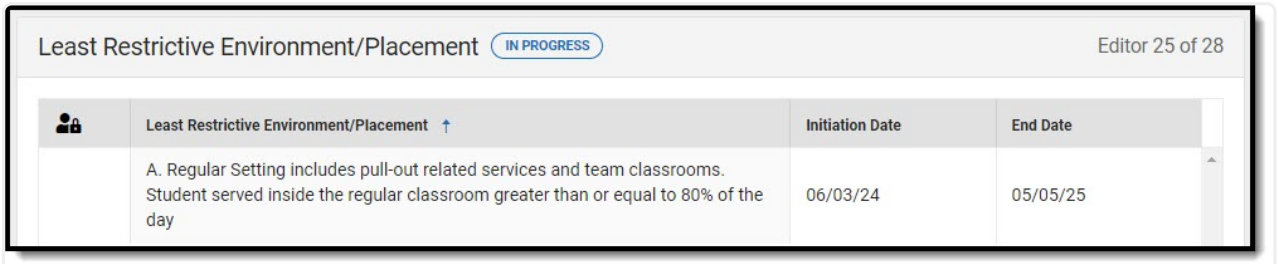
Field	Description	Validation
Service *Required*	The service provided to the student. • AUDESY: Audiology • COESY: Counseling Services • INSTMA: Instruction - Math • INSTREA: Instruction - Reading • INSESY: Instruction • INTESY: Interpreting Services • OTESY: Occupational Therapy • OMESY: Orientation and Mobility Services • PARCOESY: Parent Counseling and Training • PTESY: Physical Therapy • PSESY: Psychological Services • RECESY: Recreation • REHABESY: Rehabilitation Counseling Services • SNESY: School Nurse Services • SWESY: Social Work Services • STESY: Speech/Language Pathology Services • TRANSESY: Transportation	N/A
Service Type *Required*	The type of service. • AUDESY: Audiology • COESY: Counseling Services • INSTMA: Instruction - Math • INSTREA: Instruction - Reading • INSESY: Instruction • INTESY: Interpreting Services • OTESY: Occupational Therapy • OMESY: Orientation and Mobility Services • PARCOESY: Parent Counseling and Training • PTESY: Physical Therapy • PSESY: Psychological Services • RECESY: Recreation • REHABESY: Rehabilitation Counseling Services • SNESY: School Nurse Services • SWESY: Social Work Services • STESY: Speech/Language Pathology Services • TRANSESY: Transportation	N/A

Field	Description	Validation
Grade	The student's grade.	N/A
Setting *Required*	The location of service. Options are: • General Education Setting • Special Education Setting	N/A
Describe	A description of how the service addresses the student's needs by adapting their instruction.	This field is limited to 8000 characters.
Duration and Frequency		
Initiation Date *Required*	The first day of service.	This field populates with the Initiation Date from the Plan Header but can be modified as needed.
End Date *Required*	The last day of service.	This field populates with the End Date from the Plan Header but can be modified as needed.
Amount of time (in minutes) *Required*	The number of minutes the student receives the service.	N/A
Number times per *Required*	The number of times the student receives the service.	N/A
Frequency *Required*	The frequency of service. Options include: • Class period per month • Class periods per school day • Class periods per school week • Days per month • Days per school week • Sessions per month • Sessions per school day • Sessions per school week • Times per marking period • Times per month • Times per school day • Times per school week	N/A

Least Restrictive Environment/Placement

The Least Restrictive Environment/Placement editor documents where the student receives

services.



Least Restrictive Environment/Placement List Screen

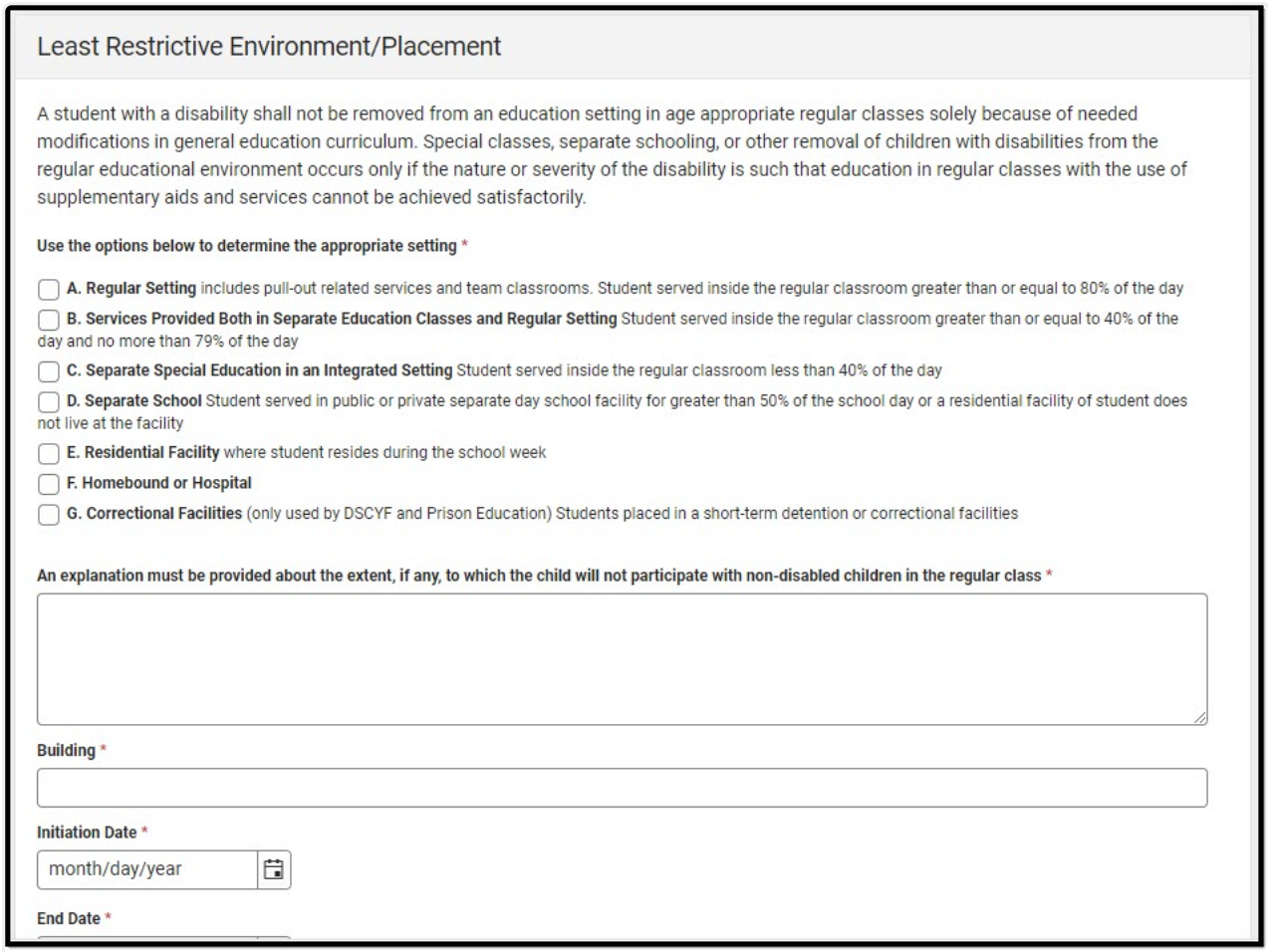
Click here to expand...

Least Restrictive Environment/Placement List Screen

Field	Description
Padlock Icon	Indicates the person editing the record.
Least Restrictive Environment/Placement	The student's placement.
Initiation Date	The first day of the placement.
End Date	The last day of the placement.

Least Restrictive Environment/Placement Detail Screen

Select an existing record or click New to view the detail screen.



Least Restrictive Environment/Placement Detail Screen

Field	Description	Validation

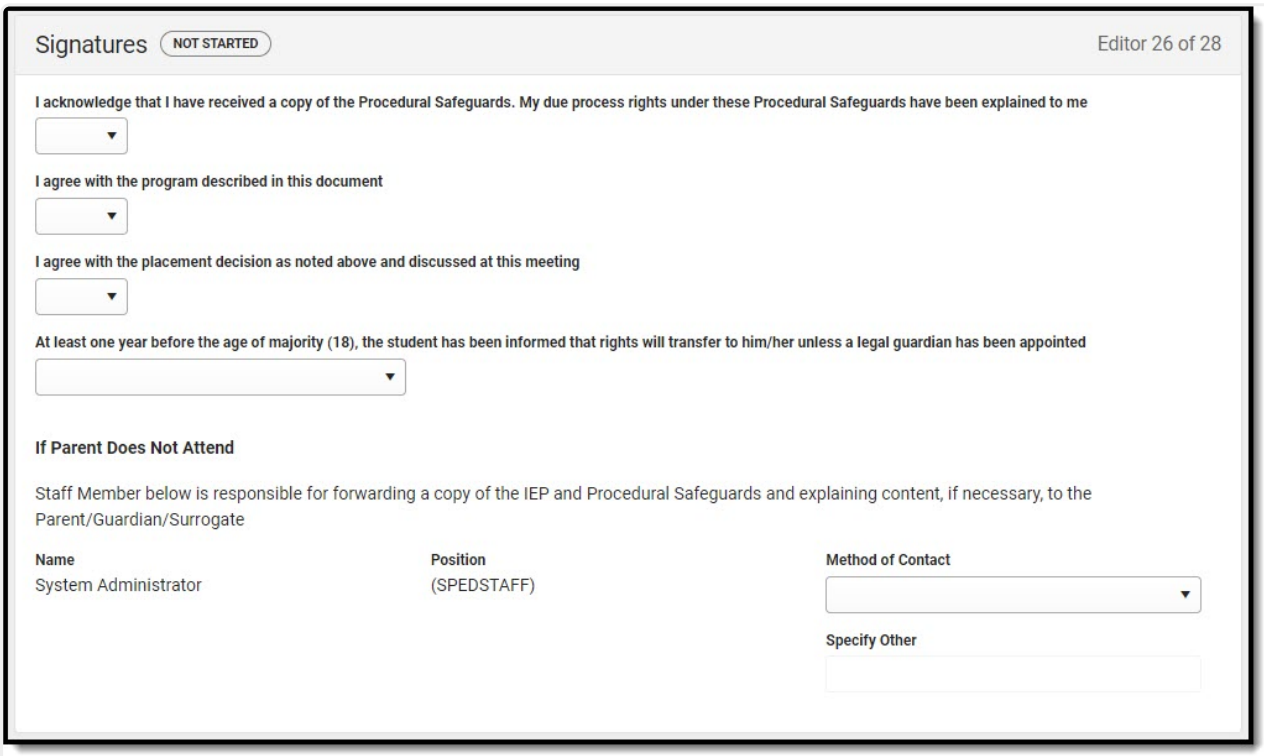
Field	Description	Validation
Use the options below to determine the appropriate setting *Required*	The student's setting. Click the expand link to view the values available. Click here to expand... Options include: • **A. Regular Setting** includes pull-out related services and team classrooms. Student served inside the regular classroom greater than or equal to 80% of the day • **B. Services Provided Both in Separate Education Classes and Regular Setting** Student served inside the regular classroom greater than or equal to 40% of the day and no more than 79% of the day • **C. Separate Special Education in an Integrated Setting** Student served inside the regular classroom less than 40% of the day • **D. Separate School** Student served in public or private separate day school facility for greater than 50% of the school day or a residential facility of student does not live at the facility • **E. Residential Facility** where student resides during the school week • **F. Homebound or Hospital** • **G. Correctional Facilities** (only used by DSCYF and Prison Education) Students placed in a short-term detention or correctional facilities	Only one option can be selected.
An explanation must be provided about the extent, if any, to which the child will not participate with non-disabled children in the regular class *Required*	A description of how the student will not participate with non-disabled peers in the regular classroom.	This field is limited to 8000 characters.
Building *Required*	The location of the placement.	This field is limited to 150 characters.

Field	Description	Validation
Initiation Date *Required*	The first day of the placement.	N/A
End Date *Required*	The last day of the placement.	N/A

Signatures

The Signatures editor documents the parent/guardian(s)' or student's (if over 18) consent of the proposed plan documented in the rest of the IEP.

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the Delaware Plan eSignature Editors process article for additional information.



Signatures Editor

Click here to expand...

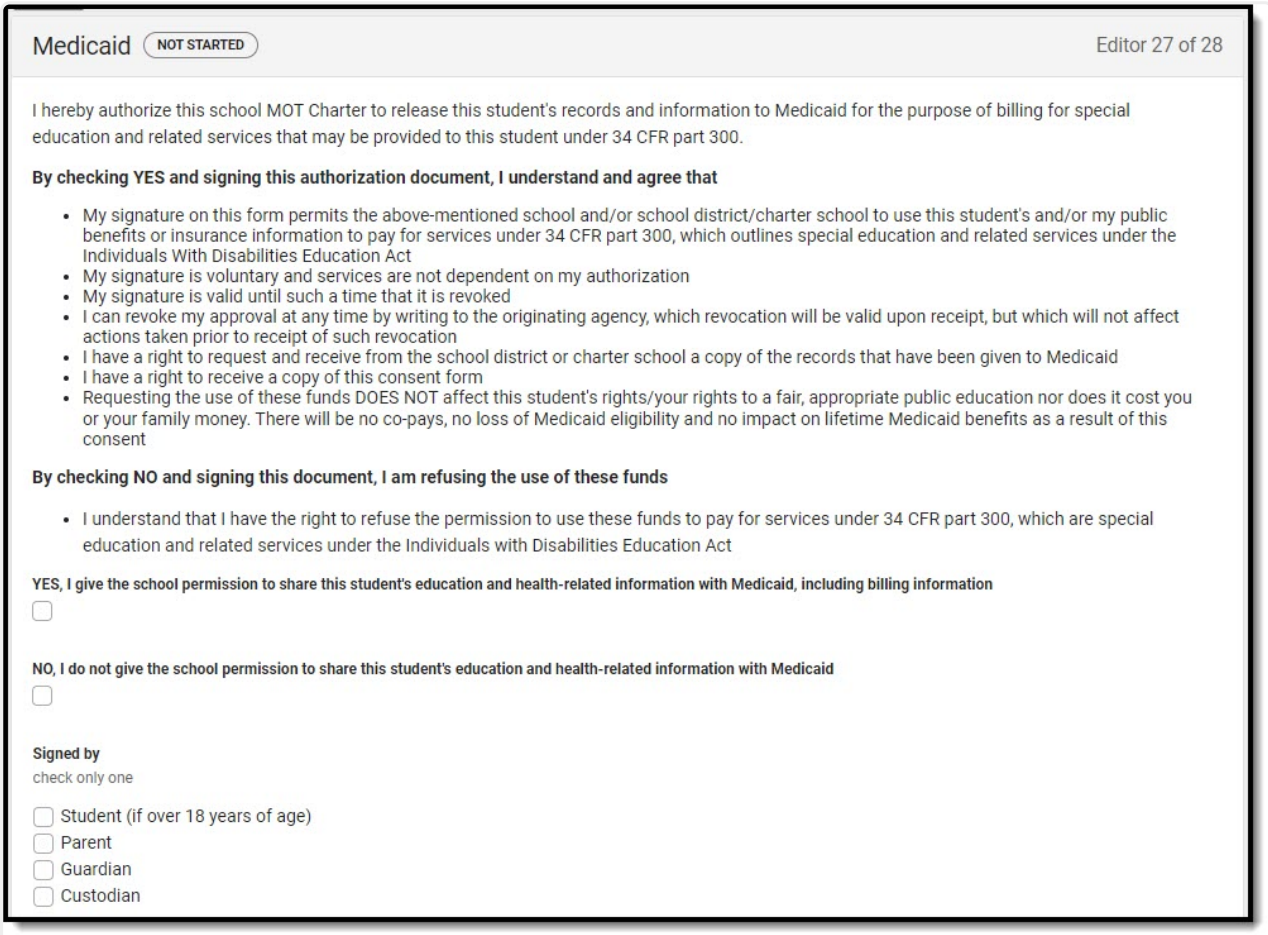
Field	Description	Validation
I acknowledge that I have received a copy of the Procedural Safeguards. My due process rights under these Procedural Safeguards have been explained to me	Indicates the parent has received the Procedural Safeguards document. Options are Yes or No.	N/A
I agree with the program described in this document	Indicates the parent agrees with the proposed program for their student. Options are Yes or No.	N/A
I agree with the placement decision as noted above and discussed at this meeting	Indicates the parent agrees with the proposed placement for their student. Options are Yes or No.	N/A
At least one year before the age of majority (18), the student has been informed that rights will transfer to him/her unless a legal guardian has been appointed	Indicates the student has been informed that their rights will transfer to them unless a legal guardian is appointed. Options are Yes or Not Applicable.	N/A
If Parent Does Not Attend		
Name	The name of the case manager.	This field populates with the Case Manager name from the Team Members tool.
Position	The role of the case manager	This field populates with the Case Manager role from the Team Members tool.
Method of Contact	The form of communicating with the parent. Options include: • In Person • Via Email • Via Mail • Via Phone • Other	N/A

Field	Description	Validation
Specify Other **Required*	The other form of communication.	*This field is available and required when Other is selected as the Method of Contact.

Medicaid

The Medicaid Consent editor documents the parent/guardian's consent for the district to disclose the student's information regarding seeking Medicaid funding.

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the Delaware Plan eSignature Editors process article for additional information.



Medicaid Editor

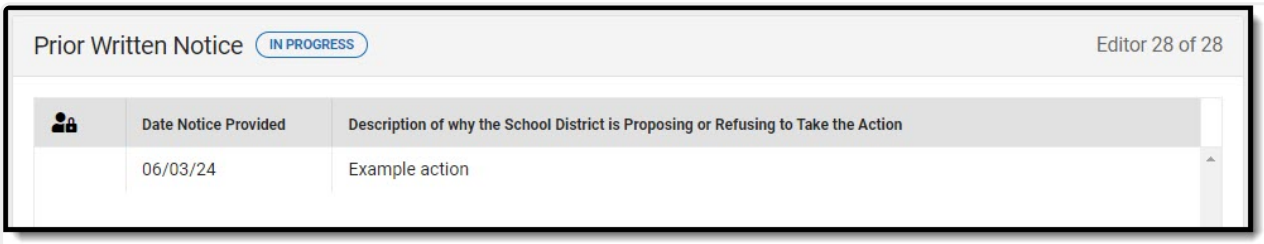
Click here to expand...

Field	Description	Validation
YES, I give the school permission to share this student's education and health-related information with Medicaid, including billing information	Indicates the person gives permission to the school to share the student's information with Medicaid.	N/A
NO, I do not give the school permission to share this student's education and health-related information with Medicaid	Indicates the person does NOT give permission to the school to share the student's information with Medicaid.	N/A
Signed by	The person signing the Medicaid consent. Options include: • Student (if over 18 years of age) • Parent • Guardian • Custodian	Only one option can be selected.

Prior Written Notice

The Prior Written Notice editor documents the proposed or refused actions considered by the IEP team and the notice dates provided to the parent/guardian(s).

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the Delaware Plan eSignature Editors Process article for additional information.



Prior Written Notice List Screen

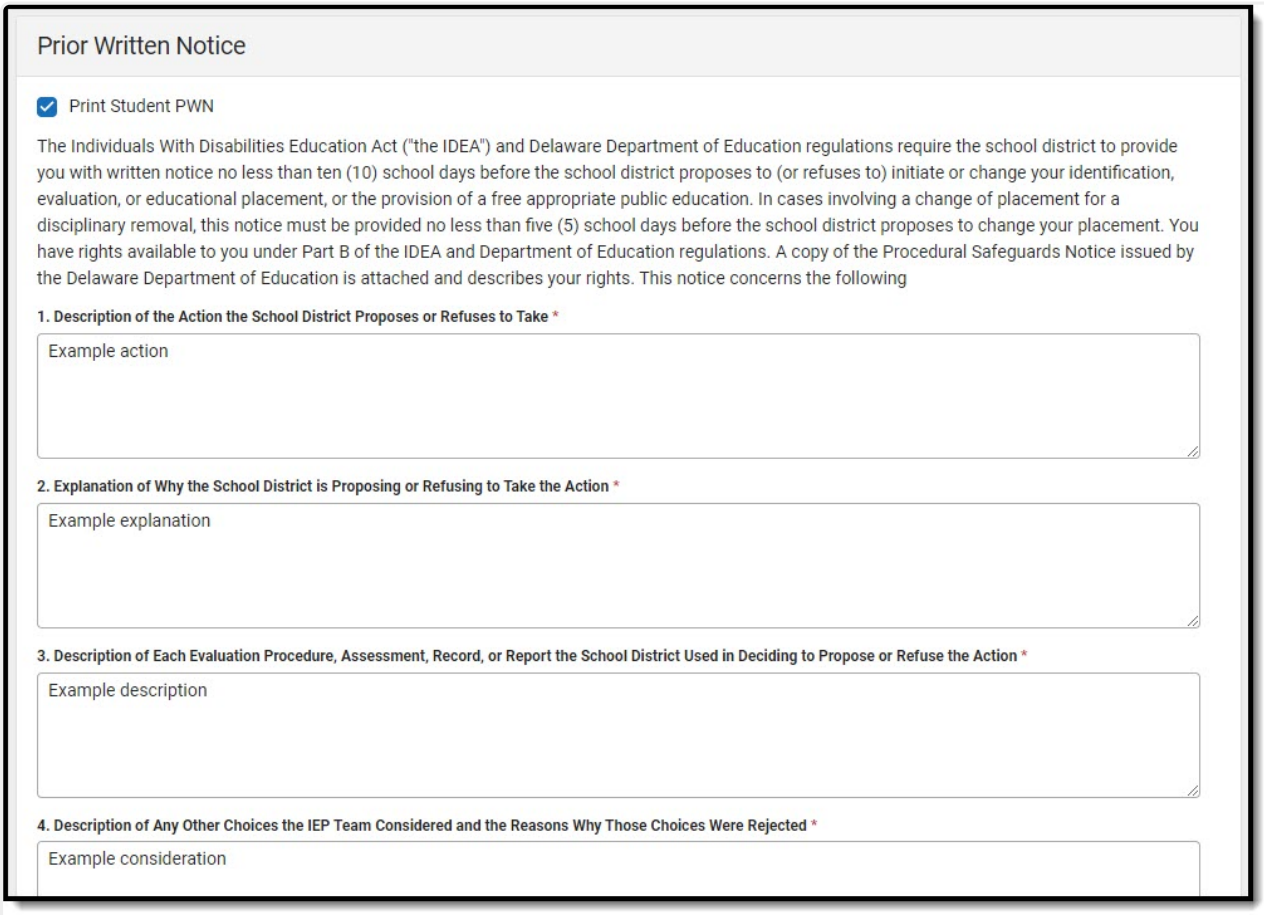
Click here to expand...

Prior Written Notice List Screen

Column Name	Description
Padlock Icon	Indicates the person editing the record.
Date Notice Provided	The date of the notice.
Description of why the School District is Proposing or Refusing to Take the Action	Displays the first 100 characters of the description from the detail screen.

Prior Written Notice Detail Screen

Select an existing record or click **New** to view the detail screen.



Prior Written Notice Detail Screen

Field	Description	Validation
Print Student PWN	Indicates the Prior Written Notice prints.	N/A

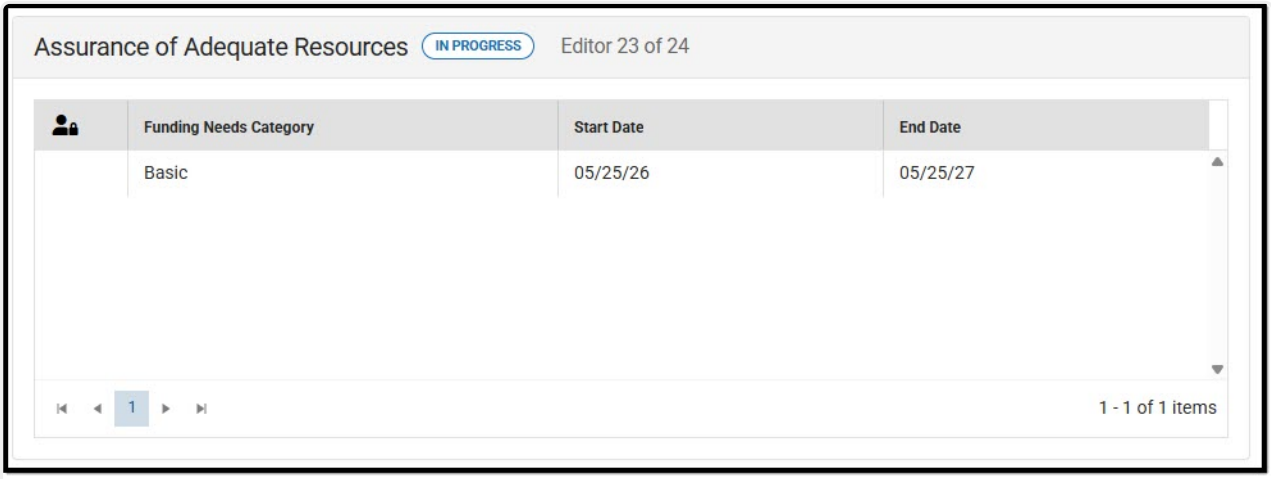
Field	Description	Validation
1. Description of the Action the School District Proposes or Refuses to Take *Required*	A description of the proposed action.	This field is limited to 8000 characters.
2. Explanation of Why the School District is Proposing or Refusing to Take the Action *Required*	An explanation of why the school is proposing or refusing to take action.	This field is limited to 8000 characters.
3. Description of Each Evaluation Procedure, Assessment, Record, or Report the School District Used in Deciding to Propose or Refuse the Action *Required*	A description of the evidence used to decide to propose or refuse action.	This field is limited to 8000 characters.
4. Description of Any Other Choices the IEP Team Considered and the Reasons Why Those Choices Were Rejected *Required*	A description of the choices considered and rejected by the IEP team.	This field is limited to 8000 characters.
5. Description of Other Reasons Why the School District Proposed or Refused the Action *Required*	Any other reasons why the school proposed or refused action.	This field is limited to 8000 characters.
This Notice is provided to you on *Required*	The date on which the notice was provided.	N/A
I waive the waiting period of 10 school days before implementation of the proposed action described in section 1 and agree that the proposed action described in section 1 can be implemented as soon as possible.	Indicates the person waives the waiting period before the implementation of the proposed action.	N/A

Assurance of Adequate Resources

The Assurance of Adequate Resources editor documents the student's funding category needs.

Click here to expand...

Assurance of Adequate Resources List Screen

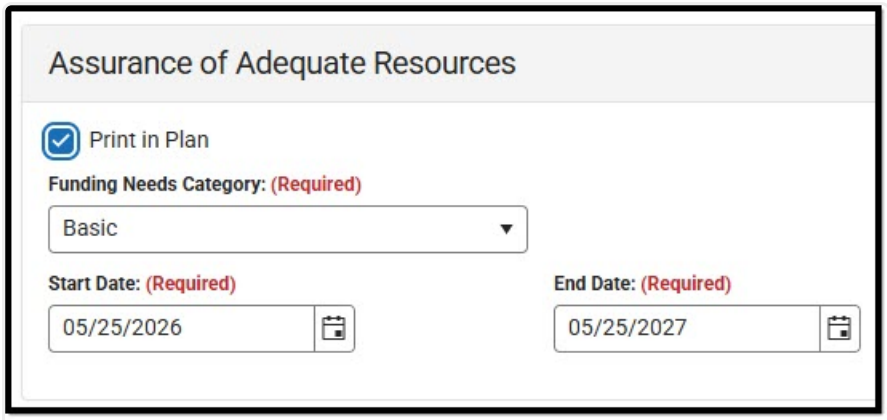


Assurance of Adequate Resources List Screen

Column Name	Description
Padlock Icon	Indicates the user currently working on the record.
Funding Needs Category	The type of funding category.
Start Date	The first day the student received funding.
End Date	The last day the student received funding.

Assurance of Adequate Resources Detail Screen

Select an existing record or click **New** to open the detail screen.



Assurance of Adequate Resources Detail Screen

Field	Description	Additional Information
Print in Plan	Indicates this record prints.	When unmarked, no information prints.
Funding Needs Category *Required*	Options include: • Basic • Complex • Intense • K-3 • Pre K • Speech Only (4-12)	This attribute is located at SpecialEDState FundingNeeds > Funding Needs Category. **Database Location**: SEPGenericForm.SEPGenericFormDetail.vcMax1 **Ad hoc Inquiries**: Student > Learner Planning > Learning Plans > Assurance of Adequate Resources > fundingNeeds (deAssuranceAdequateResources.fundingNeeds)
Start Date *Required*	The first day the student received funding.	The Funding Needs Start and End Dates must fall within the Plan Start and End Dates. **Database Location**: SEPGenericForm.SEPGenericFormDetail.smalldate1 **Ad hoc Inquiries**: Student > Learner Planning > Learning Plans > Assurance of Adequate Resources > fundingStart (deAssuranceAdequateResources.fundingStart)
End Date *Required*	The last day the student received funding.	The Funding Needs Start and End Dates must fall within the Plan Start and End Dates. **Database Location**: SEPGenericForm.SEPGenericFormDetail.smalldate2 **Ad hoc Inquiries**: Student > Learner Planning > Learning Plans > Assurance of Adequate Resources > fundingEnd (deAssuranceAdequateResources.fundingEnd)